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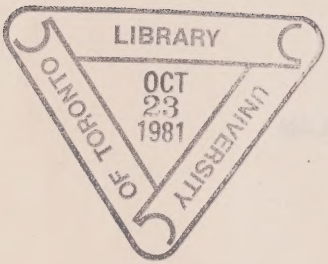
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ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1967

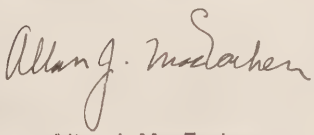

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His Excellency the Right Honourable Roland Michener, Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to your Excellency the Annual Report on the administration of the Canada Assistance Plan for the fiscal year ended March 31, 1967.

Respectfully submitted,



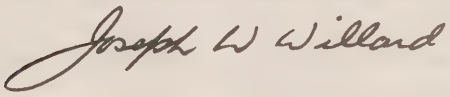
Allan J. MacEachen,
Minister of National Health and Welfare

The Honourable Allan J. MacEachen, P.C., M.P.,
Minister of National Health and Welfare,
Ottawa.

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1967.

Respectfully submitted,



Joseph W. Willard,
Deputy Minister of National Welfare

ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1967

The Canada Assistance Plan, for which preparatory work began in 1963, was enacted by Parliament and came into operation during 1966-67. It received Royal Assent on July 15, 1966, with retroactive effect to April 1st of that year.

The Plan is a measure for supporting the integration, broadening and improvement of provincial and municipal public assistance programs and encouraging the extension and development of welfare services. Under it, contributions amounting to fifty per cent of shareable costs are made toward provincial and municipal expenditures for public assistance and welfare services.

Following enactment of the Plan, Regulations under Part I were developed in close collaboration with the provinces and were adopted by the Governor-in-Council on February 8, 1967. All provinces indicated their intention of entering into Agreements under the Plan, and by the end of the fiscal year, eight had signed Agreements.

OBJECTIVES AND MAIN FEATURES OF THE PLAN

The Canada Assistance Plan has two primary objectives. These are to support the provision of adequate assistance to persons in need and to encourage the development and extension of welfare services designed to help prevent and remove the causes of poverty and dependence on public assistance.

The Plan, and the Regulations and Agreements under it, are the result of close and continuing federal-provincial collaboration at the ministerial and official levels. This collaboration is being continued in the administration of the Plan.

The following are the main features of the Canada Assistance Plan:

Comprehensive Approach

The Plan supports the development of integrated, comprehensive general assistance programs, thus enabling provinces to meet the varying requirements of different groups within one program and administrative framework. Where there have been four federal-provincial assistance programs – for the aged, the blind, the disabled, and the unemployed – the Canada Assistance Plan makes it possible for the provinces, at their option, to combine these into a single program.

Assistance on the Basis of Need

The Plan provides for granting of assistance on the basis of an assessment of a person's budgetary requirements as well as his income and resources, rather than, as in the present "categorical" programs, on the basis of income and resources only. No upper limit is placed on the benefits for which federal contributions are available.

Supplementation of Income

An important feature of the Plan is that it provides for federal contributions toward the costs of supplementary payments over and above benefits paid under income maintenance programs such as old age security (which includes the guaranteed income supplement), the Canada Pension Plan, the Quebec Pension Plan, and unemployment insurance.

Health Services

Through the Plan, the federal government shares in the cost of health care services to persons in need. These can include medical and surgical services, nursing, dental and optical care, including dentures and eye glasses, drugs, prosthetic appliances and other health services.

Mothers' Allowances and Child Welfare

The Plan provides federal sharing for the first time in the costs of mothers' allowances,–that is, programs providing aid to needy mothers and their dependent children. Federal sharing is also extended to cover costs of maintaining children in the care of child welfare authorities.

Institutional Care

The Plan also provides for federal sharing in the cost to the provinces and municipalities of maintaining needy persons in a wide range of residential welfare institutions, known collectively as homes for special care. These include homes for the aged, nursing homes, homes for unmarried mothers, hostels for transients and child care institutions.

Administration and Welfare Services

The Plan provides contributions toward the costs of strengthening and extending the administration of public assistance programs and associated welfare services. The services that can be supported include rehabilitation services, casework, counselling and assessment, adoption services, homemaker and day-care services, and community development.

Indian Welfare

Federal-provincial agreements are authorized under Part II of the Plan to provide for the extension, with the consent of Indian bands, of provincial welfare programs to Indians living on reserves or in unorganized territory in the provinces. The Plan provides for federal sharing on the basis of a special financial formula that takes into account the higher expenditures incurred by the provinces in assuming this responsibility.

Work Activity Projects

Provision is made under Part III of the Plan for special work activity programs to help improve the motivation and work capacity of persons who have not been able to take full advantage of training opportunities, or who have unusual difficulty in securing or retaining employment.

BACKGROUND AND DEVELOPMENT OF THE PLAN

Previous Public Assistance Legislation

The Canada Assistance Plan has its roots in the public assistance programs that are being consolidated under it, particularly the four federal-provincial programs of old age assistance, blind persons allowances, disabled persons allowances, and unemployment assistance. These shared-cost programs, which are the result of forty years of development, were preceded by a variety of public measures to aid the poor. Some of these measures go back to the early history of the provinces, but only with the advance of industrialization toward the end of the nineteenth century and, more particularly, in the early decades of the twentieth century did public assistance programs begin to assume major dimensions. It then became necessary for the provincial and federal governments to accept responsibilities which had previously been carried by voluntary institutions and agencies or delegated to municipalities.

The initial approach taken by the senior governments was to leave responsibility for general assistance with the municipalities and to select for special attention readily definable groups which were regarded as having a strong claim to aid on a more assured basis. An early example of such groups was widows with dependent children on whose behalf mothers' allowances programs were introduced by provincial governments during and after the First World War.

Federal-provincial co-operation in the provision of assistance for a special group began in 1927 when the Parliament of Canada enacted the Old Age Pensions Act. Under this measure, the federal government undertook to pay one-half of the cost of a pension of up to $20 per month granted by any province to persons over the age of seventy years who met the residence and means-test set out under the federal Act.

The Old Age Pensions Act was amended over the years in various ways. One of the most significant amendments was the extension of coverage, in 1937, to blind persons forty years of age and over. In 1951, it was replaced by two new federal-provincial assistance programs,–the Old Age Assistance Act covering persons between the ages of sixty-five and seventy, and the Blind Persons Act covering blind persons over the age of twenty-one (reduced in 1955 to age eighteen). In the same year the federal Old Age Security Act was passed, providing a universal flat-rate pension for persons over the age of seventy.

A third federal-provincial program for a special group, the permanently and totally disabled, was adopted in 1954 with the enactment of the Disabled Persons Act. Like the other two measures, it employed a means-test under which the applicant's income and property were taken into account in determining eligibility for a pension and, like old age assistance, it provided for a federal contribution of fifty per cent of assistance payments. The Blind Persons Act differed from the other programs, in that it provided for a federal contribution of seventy-five per cent and allowed the use of higher income ceilings in determining eligibility.

The federal government had also made grants to provinces and municipalities for general assistance in two periods of economic depression -- just after the First World War and during the 1930's. In the latter period, grants on a large scale were necessary because of the lack of provincial and municipal finances to meet costs resulting from massive unemployment.

To avoid a similar situation after the Second World War, the federal government established a national contributory unemployment insurance program in 1940, with contributions beginning July 1, 1941. In 1945, as part of a comprehensive post-war plan of reconstruction, the federal government also proposed the establishment of an unemployment assistance program which it would finance and administer in conjunction with unemployment insurance. However, the federal and provincial governments failed to reach agreement on the 1945 proposals and no action was taken on unemployment assistance until 1956.

In that year, the Parliament of Canada enacted the Unemployment Assistance Act which, contrary to the approach proposed in 1945, provided for a shared-cost program under which assistance would continue to be administered by the provinces and their municipalities. The Act initially contained a population threshold feature under which federal contributions would begin only when the number of persons receiving assistance exceeded a stated percentage of the population; this was designed to limit federal sharing to the costs of assisting the employable unemployed. In 1957, the threshold was removed and the measure moved in the direction of becoming a general assistance program, although it retained a number of important exclusions which caused it to fall well short of being a comprehensive assistance measure.

The unemployment assistance program differed from the three categorical allowance programs in that it did not specify the conditions of eligibility under which assistance had to be granted, except for the requirement of being unemployed and in need, and it placed no ceiling on the rates of assistance to be shared. The provinces were thus free to develop their general assistance programs along lines best suited to their needs. With the stimulation of federal funds, the provinces made extensive improvements in the coverage and benefits provided under their general assistance programs in the period from 1956 to 1966, and the groundwork was laid for the adoption of a single assistance measure through which help could be provided on the basis of need to any person requiring it.

Development of the Plan

At the federal-provincial conference called in September 1963 to discuss the development of a new contributory wage-related social security measure, the Canada Pension Plan, it was recognized that there was also need for an improved public assistance program. This view was expressed in the closing communique of the conference which proposed that "the whole field of social assistance should be jointly re-examined in the hope of developing one general assistance program based on need." The question was further

considered at the federal-provincial conference of Prime Ministers and Premiers in November 1963, which recommended the establishment of "a federal-provincial working group to review the operation of all joint welfare programs, in preparation for further discussion by Ministers."

As a result of that recommendation, a working party of federal and provincial Deputy Ministers of Welfare and other officials met in February 1964 to identify the issues that would have to be considered in developing an improved assistance program. In May 1964, the Ministers of Welfare, under the chairmanship of the Minister of National Health and Welfare, met in Ottawa to review the proposals of the working group. They recommended that the federal government and the provinces "should work toward an integrated, comprehensive general assistance program based on meeting need." The provincial Ministers also recorded their view that the federal government should "share fully in the costs of mothers' allowances, health services and administration."

An additional factor that supported the development of more effective assistance and welfare service programs was the growing concern that was being expressed about problems of poverty. It was increasingly recognized that the talents of many Canadians were being wasted because of poverty, illness, inadequate education and training, and inequality in opportunities for work. In developing its legislative program for 1965, the government concentrated particularly on bringing forward a group of measures designed to combat these problems by improving the opportunities of people affected by them. The aim of the programs was to achieve the full utilization of the nation's human resources and the elimination of poverty.

One of the government measures referred to in the Speech from the Throne in April 1965 was the Canada Assistance Plan. It was described by the Prime Minister as a means of providing a framework for federal-provincial co-operation in helping those who need help the most. He noted that a number of the provinces had expressed their wish to develop a comprehensive general assistance measure under which the varying requirements of different groups could be met through one program. He emphasized that the objectives of the program would be to encourage the provision of adequate levels of assistance to persons in need and to support the development of social welfare services to assist such persons in achieving the greatest possible measure of self-support.

The government's proposals for the Canada Assistance Plan were thoroughly reviewed at a second meeting of Ministers of Welfare held in April 1965, and the basic features of the Plan were approved. The provincial Ministers welcomed the Plan "as proving a basis for a new and more flexible approach to public welfare in Canada." A number of technical problems were noted during the discussion, and it was agreed that meetings of federal and provincial officials should be continued. At a third meeting of Ministers of Welfare held in January 1966, additional suggestions relating to the coverage of the Plan were made, including proposals for its extension to children and youth in the care of child welfare authorities. The extensive

federal-provincial collaboration in the development of the Plan ensured its relevance to varying conditions across Canada and its acceptability to the provinces which carry administrative responsibility for the programs supported by it.

A motion for the introduction of the Canada Assistance Plan Bill was placed before the House of Commons on April 4, 1966; the Bill passed first reading on June 21st and, after extensive debate, received third reading in the House of Commons on July 8th and in the Senate on July 12th. Notice of Royal Assent to the Bill was given in the Canada Gazette on July 23rd.

APPLICATION OF THE PLAN

Assistance to Persons in Need

A primary objective of the Plan is to support the provision of adequate assistance to persons in need. Contributions are made under it toward the cost of assistance that is granted on the basis of a needs-test – that is, a test under which the budgetary requirements, as well as the income and resources, of applicants and their dependents are taken into account. This is in contrast to the means-test under which only income and assets computed as income are taken into account within set benefit and income ceilings.

The major costs of assistance for which contributions are made under the Plan are for basic requirements which are defined in the legislation to include food, shelter, clothing, fuel, utilities, household supplies and personal requirements. When provinces enter agreements under the Plan, they agree to take these requirements into account in determining eligibility for assistance. Allowances for items such as food, clothing, household supplies and personal requirements are usually based on rate scales set by the provinces on the basis of budget studies. These allowances vary with family size and composition. For other budgetary items such as shelter, fuel and utilities, actual costs to the recipient are generally used.

The rehabilitative emphasis in the Plan is evident in its provision for contributions toward the costs of welfare services purchased for persons in need and items of special need obtained for such persons. Welfare services, which can be purchased on a fee-for-service basis, may include rehabilitation services, casework, counselling and assessment services, and homemaker and day-care services. The items of special need toward which contributions can be made include tools or equipment that are essential in enabling a recipient to obtain employment and items necessary for his safety, well-being or rehabilitation. These include household equipment and furnishings, repairs to property, special food or clothing and items required by disabled persons.

The Plan is designed to support the provision of assistance to any person in need, whatever the cause of his need. The legislation does identify, however, the major groups to whom assistance will be provided. These are

described as persons who are unable to provide adequately for themselves because of inability to obtain employment, loss of the principal family provider, illness, disability or age. Other persons such as those who are employed but require supplementary income may also be assisted.

The programs through which assistance is granted are variously known in the different provinces as social assistance, social allowances, general assistance, family benefits and general welfare assistance. The patterns of administration for these programs vary from province to province. In two provinces, Newfoundland and New Brunswick, the province has assumed total responsibility for assistance administration, and this is also true in Saskatchewan, except for two municipalities. In most other provinces, assistance is provided through a combination of provincial and municipal administration. Generally, those expected to be in need on a long-term basis are assisted through provincial programs, while those whose needs are of shorter duration are assisted by municipalities.

Relationship to Categorical Programs

A basic objective of the Plan is to support the development of integrated programs through which assistance can be provided to any person in need. In line with this objective, Part V of the Plan enables the provinces, at their option, to cease accepting applications for old age assistance and for blind and disabled persons allowances and begin assisting the aged, the blind and the disabled through general assistance programs. Persons who have already qualified for allowances under these programs can be transferred to a general assistance program if they will qualify for comparable or greater benefits under that program.

Saskatchewan ceased to accept applications for categorical allowances on April 1, 1966 and transferred major portions of its existing caseloads to the Saskatchewan Assistance Plan. By the end of the year, Ontario and Prince Edward Island had indicated their intention to take similar action early in 1967-68, the latter in relation to the old age assistance and disabled persons allowance programs only.

Maintenance of Children

The assistance provisions of the Plan also cover children under the age of twenty-one who are in the care or custody or under the control or supervision of child welfare authorities. This extends to children, most of whom are in foster homes, that have been placed in the care of such authorities by court order or by agreement with the parents. The assistance costs for which a contribution can be made include foster home payments, frequently based on standard rates for various age groups, health care services and other needs of children. The programs covered include those administered by provincial child welfare authorities and through children's aid societies.

Institutional Care

The costs of providing care for persons in need who are in welfare institutions are also covered under the Plan. These institutions are referred to as homes for special care and include homes for the aged, nursing homes, hostels for transients, homes for unmarried mothers, child care institutions and other residential institutions that have the primary purpose of providing supervisory, personal or nursing care or social rehabilitation. The Plan does not cover care provided in hospitals, correctional institutions or institutions whose primary purpose is education. The homes for special care provisions of the Plan have been carried forward from the Unemployment Assistance Act and extended to cover child care institutions such as receiving homes, orphanages and specialized welfare institutions for children with physical or mental disabilities.

At the end of the year, identification of institutions that would come within the scope of the Plan had not been completed. At that time, however, some 2,000 institutions with a capacity of more than 75,000 beds had been recognized as homes for special care.

Welfare Services

As a means of supporting the development of preventive and rehabilitative programs, the Plan authorizes contributions toward provincial and municipal expenditures for welfare services. These are described, generally, as services that have as their object the lessening, removal or prevention of the causes and effects of poverty, child neglect or dependence upon public assistance. More particularly, they include rehabilitation services, casework, counselling and assessment services, homemaker and day-care services, and community development. Services related wholly or mainly to education, correction, recreation or the provision of health or hospital care are not covered. Administrative, secretarial and clerical functions associated with the provision of welfare services and the administration of assistance are covered, as are staff training consultation, research and evaluation associated with welfare programs. The latter are included as a means of supporting improvements in the effectiveness of personnel and encouraging assessment of programs in relation to their objectives.

An important feature of the Plan is its emphasis on prevention of the social problems that lead to poverty, family breakdown and the need for public assistance. Thus, contributions can be made for costs of welfare services extended not only to persons in need, but also to persons who may become needy if they do not receive such services.

The Plan is intended to encourage the improvement of existing services and the development of new ones. In view of this, contributions

are made toward provincial or municipal expenditures for welfare services that are in excess of those incurred during a period referred to as the base year; in the case of provinces, this is the fiscal year 1964-65. The types of cost that are shared are salaries and fringe benefits, travel costs, including attendance at conferences and seminars, certain costs of staff training, and fees for consultation and research.

Contributions are made when services are provided through departments or agencies that have been recognized as provincially approved agencies under the Plan. Most of the agencies in which costs are shared are provincial and municipal departments of welfare, the latter varying in size from departments employing only one or two officers to those in metropolitan areas employing several hundred persons. Contributions are also made, however, toward costs incurred by voluntary agencies to the extent that these are supported from provincial or municipal funds. These include children's aid societies, family bureaus and other agencies providing child care, family counselling, homemaker and day-care services.

Provisions of Agreements under the Plan

In entering Agreements under the Plan, provinces have undertaken to meet a number of criteria that are called for in the legislation. They have agreed to a needs-test in determining eligibility for assistance and to provide assistance to any person in need in an amount or manner that takes into account his basic requirements, — that is, his requirements for food, shelter, clothing, fuel, utilities, household supplies and personal requirements. The provinces have also agreed not to require a period of residence within their boundaries as a condition of eligibility for assistance, and they have undertaken to provide in their law a procedure for appeals from decisions respecting applications for assistance or the granting of assistance. This undertaking is to be met within one year after the effective date of an Agreement.

In recognition of the preventive and rehabilitative emphasis that is part of the Plan, the provinces have undertaken to continue, as may be necessary and expedient, the development and extension of welfare services.

Description of Provincial and Municipal Programs

The Canada Assistance Plan sets broad conditions under which the costs of assistance and welfare services can be shared. Within this general framework, however, contributions can be made toward costs of programs that are developed and administered in the manner best suited to individual provincial circumstances and preferences. Brief descriptions of the programs for which costs are shared in each province are given in Appendix "A", attached, together with a résumé of significant developments that took place in the provinces during 1966-67. The Appendix describes the programs as they stood at the end of the fiscal year.

ADMINISTRATION OF THE PLAN

Development of Regulations and Agreements

Following the enactment of the legislation, extensive consultations were held with the provinces concerning the Regulations and Agreements under the Plan. This included official discussions held in each of the provinces to obtain provincial views on the proposed Regulations and Agreements and their impact on provincial programs and plans. The Regulations, which were adopted by Order-in-Council on February 8, 1967, provided further definitions of terms as required by the legislation, outlined the kinds of costs for which contributions could be made, and indicated the basis for payment of claims under the program. These were carried forward into the Agreements which outline the undertakings by the provinces and Canada under the Plan.

Eight provinces had entered into Agreements under Part I of the Plan by the end of the year and the other two, New Brunswick and Quebec, had indicated their intention of doing so, the latter under the "contracting-out" provisions of the Established Programs (Interim Arrangements) Act. The dates on which the Agreements were made with the provinces are as follows:

Newfoundland	— March 30, 1967
Prince Edward Island	— March 30, 1967
Nova Scotia	— March 22, 1967
Ontario	— March 28, 1967
Manitoba	— March 20, 1967
Saskatchewan	— March 22, 1967
Alberta	— March 30, 1967
British Columbia	— March 23, 1967

Discussions on Part II of the Plan were initiated during the year, and plans were made for similar discussions concerning Part III.

Administration of the Program

The program is administered by the Canada Assistance Plan Division in the Welfare Assistance and Services Branch. This Division is also responsible for administering the unemployment assistance program and the old age assistance and blind and disabled persons allowances programs. The Division consists of administrative and consultative staff at headquarters and field staff located in nine of the provinces.

During the year, arrangements were worked out for the administration of the program, including the processing of claims, and work was continued on the development of consultative services. Canada has undertaken in Agreements with the provinces to provide consultative services, where feasible, in areas related to the development and operation of assistance and

welfare services programs. At the end of the year, the Division was equipped to provide consultative services in relation to Indian welfare, institutional care and accounting and auditing, and plans had been made to extend this in other areas such as public assistance standards and welfare services.

In addition to the collaboration associated with the development of Regulations and Agreements, discussions were held with all provinces during the year to ascertain the extent to which contributions could be made toward costs of their existing programs and to advise them on the kind of support that would be available to them in the further development of assistance and welfare services.

The field staff of the Division is responsible for carrying out administrative reviews in the field to determine the shareability of costs and for processing reimbursement claims. Field representatives are also responsible for maintaining liaison with provincial officials by advising them on interpretation of federal legislation and policies and assisting them in the preparation of claims. They also maintain contact with the Audit Services Branch which is responsible for an annual financial audit of the program.

Expenditures for Assistance and Welfare Services

It will be noted that the eight Agreements entered into were signed late in the fiscal year. Partial claims were submitted by three provinces for a total amount of $10,495,586.67: amounts paid were $448,674.44 to Nova Scotia, $6,931,247.34 to Ontario, and $3,115,664.89 to Saskatchewan.

Major contributions toward costs of assistance were made during the year under the four other shared-cost programs administered by the division. The expenditures under these programs amounted to $19.6 million for old age assistance, $3.4 million for blind persons allowances, $15.0 million for disabled persons allowances, and $143.3 million for unemployment assistance. It is anticipated that almost all of the expenditures for programs coming under the Unemployment Assistance Agreements in 1966-67 will come under the Canada Assistance Plan in 1967-68, as will a portion of those for groups covered in the current year under old age assistance and blind and disabled persons allowances.

When total federal outlays for the Canada Assistance Plan for 1966-67 are known, it is estimated that these will amount to approximately $298 million when added to contributions under the four existing programs and compensation to Quebec under the Established Programs (Interim Arrangements) Act. This increase of $105 million over costs under the four programs for 1965-66 is attributable to broadening of the basis for federal contributions to assistance and welfare services through the Canada Assistance Plan and to improvements in provincial programs.

APPENDIX "A"

PROVINCIAL PROGRAMS SUPPORTED DURING 1966-67 UNDER THE CANADA ASSISTANCE PLAN

As described in the body of this report, the federal government contributes toward the costs of assistance and welfare services provided by the provinces to persons who require them.

This appendix outlines the provincial programs through which this help was provided during the fiscal year 1966-67, together with a résumé of significant developments that took place in the provinces. The references are only to programs in effect during 1966-67, and consequently do not take into account any subsequent changes.

NEWFOUNDLAND

General Assistance

General Assistance is provided under the Social Assistance Act to unemployed persons and to persons requiring assistance on a long-term basis, including needy mothers and incapacitated persons. Benefits are determined on the basis of budgetary allowances set by regulation to cover food, clothing and personal care, fuel and rent or, in the case of a person living in his own home, household maintenance and utilities. The program is administered directly by the Department of Public Welfare through some sixty-five district offices.

Health Care Services

Health care services are provided to persons in need by the provincial Department of Health through a variety of programs. The costs of these programs are shared under the Canada Assistance Plan and include fees for medical services to indigents, costs of drugs and supplies, services provided through the Children's Health Service, and air ambulance services.

Institutional Care

Needy persons requiring institutional care are assisted through the social assistance program in meeting the costs of care in nursing homes, homes for the aged operated under religious auspices, and in proprietary boarding homes licensed by the Department of Public Welfare. In addition, there is a 220-bed institution (Hoyle's Home) which is operated by the provincial Department of Public Welfare.

During the year, the maximum rates payable varied from $75 per

month in boarding homes to $180 per month for bedridden persons in institutions. Thirty-five homes containing 819 domiciliary and nursing beds were listed as homes for special care under the federal cost-sharing Agreement.

Child Welfare

Federal contributions are made toward the cost of maintaining children placed in foster and group homes under the authority of the Child Welfare Act. The foster home rates in effect at the end of the year varied from $41 to $59 per month, depending on the age of the child in care. This program is administered by the Child Welfare Division of the Department of Public Welfare through its district offices. Also covered are the costs of providing care for disabled children in the Infants' Homes in St. John's.

Welfare Services

Contributions under the Canada Assistance Plan are being made for new costs of welfare services provided through the provincial Department of Public Welfare. These costs include administering the social assistance program and providing associated welfare services, as well as providing child care, protection and adoption services.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

New general assistance regulations were adopted covering long-term and short-term assistance, including maintenance in homes for special care.

Increases were made in assistance rates on April 1, 1966 and again on July 1, 1966.

Increases in foster home rates were made on July 1, 1966.

PRINCE EDWARD ISLAND

General Assistance

General assistance is provided under the new General Welfare Assistance Act introduced during the year. Benefits are determined on the basis of budgetary allowances for requirements which include food, clothing, shelter, household and personal items, fuel and utilities. Provision is also made for assistance to cover items of special need, including housekeeping services and materials or services required in rehabilitation. The program is administered by the provincial Department of Public Welfare, two municipalities, and two Welfare Bureaus in the City of Charlottetown.

Health Care Services

The General Welfare Assistance Act provides for the granting of aid to cover the costs of health care services. Such services may include necessary

medical and surgical services, nursing, dental care, optical care, essential prescribed drugs and appliances.

Institutional Care

Persons in need in nursing homes, homes for the aged, hostels and other residential welfare institutions are assisted to meet the costs of care under the welfare assistance program. Persons in care are entitled to a comforts allowance of up to $10 per month. Maintenance rates are approved by the provincial director of the welfare assistance program.

During the year, seven institutions having a total of 530 domiciliary and nursing beds were listed as homes for special care under the federal cost-sharing Agreement. Provincially operated institutions account for one-half of these beds.

Child Welfare

Provincial payments are made for the maintenance of children who are placed in foster homes under the authority of the Children's Protection Act. The costs include those for neglected children permanently or temporarily committed by the Courts to the care and custody of the child welfare authorities.

The child care program is administered by the provincial Department of Public Welfare and by two Welfare Bureaus in Charlottetown.

Welfare Services

Federal contributions are being made toward new costs of welfare services provided by the provincial Department of Public Welfare, including costs of administering the general welfare assistance program and of providing child care, protection and adoption services.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

The general welfare assistance program was introduced, bringing together in one program the previous mothers allowance and social assistance programs and making provision for the payment of assistance on the basis of a needs-test.

Assistance rates were increased under the general welfare assistance program.

Plans were developed for the termination of acceptance of applications for old age assistance and disabled persons allowances.

A program of supplementary allowances of $25 per month for all old age security recipients was introduced. To the extent that this supplement was paid to persons in need, its costs were shared by the federal government.

NOVA SCOTIA

General Assistance

General assistance is provided under Parts I and II of the Social Assistance Act.

Provincial assistance is provided under Part I to needy families with dependent children, to disabled persons not able to qualify for aid under the Disabled Persons Act, and to foster children. Assistance is paid on the basis of a needs-test with maximum benefits for disabled persons amounting, as of the end of the fiscal year, to $55 per month. Benefits for needy families calculated at sixty per cent of assessed budgetary requirements are paid up to a maximum of $150 per month.

Municipal assistance is provided under Part II of the Act to persons not covered by the provincial assistance program. Under this Part, the province sets budget standards and also provides for financial incentives to municipalities for the payment of assistance on the basis of need. Provincial contributions amount to seventy-five per cent or more of costs, depending on the fiscal capability of the municipality. Assistance is administered through municipal welfare departments and, in several areas, by the provincial Department of Public Welfare or a local children's aid society on behalf of the municipality.

Health Care

Medical services are provided through an agreement between the province and the Nova Scotia Medical Society to recipients of provincial assistance and long-term recipients of municipal assistance. Benefits include medical, surgical and obstetrical care and eye examinations. Additional assistance can be provided by the province or through municipalities to cover the costs of optical and dental care and drugs.

Institutional Care

Needy persons requiring institutional care are assisted by municipalities under Part II of the Social Assistance Act. Care is provided in fifteen municipal homes for the aged, six municipal homes for the disabled (which care mainly for retarded adults), and in a number of proprietary homes for the aged and nursing homes licensed by the Department of Public Welfare under the Boarding Homes Act or by the Department of Health under the Nursing Homes Act.

During the year, 141 homes providing nursing or domiciliary care and having a total of 2,005 beds were listed as homes for special care under the federal cost-sharing agreement. Rates paid for care in each home are determined according to the types and levels of care provided and are

approved by the Department of Public Welfare.

Child Welfare

Federal contributions are being made toward the costs of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Act. Supervision of such children is the responsibility of the provincial Department of Public Welfare and the twelve children's aid societies in the province. Payments for maintenance were based upon per diem rates set by the Minister during 1966-67, but in subsequent years such rates are to be set by a committee established under the Child Welfare Act.

Child care institutions include the Nova Scotia Training School for retarded children at Truro and three provincial children's homes, also for retarded children.

Welfare Services

Federal contributions toward new costs of welfare services are being made for three kinds of agencies in Nova Scotia,-namely:

- the provincial Department of Public Welfare, including the headquarters administration and the thirteen regional and district offices;
- eighteen organized municipal departments of welfare that are responsible for the administration of assistance and the provision of related welfare services; and
- twelve children's aid societies in which the province pays the cost of supervising children in care and contributes, together with the municipalities, to the costs of protection services, services to unmarried mothers, and adoption services.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

The basis for granting provincial assistance was converted from a means-test to a needs-test. The maximum benefits available were increased from $90 to $150 per month for needy families and from $40 to $55 for disabled persons.

Maximum budgetary standards of need for municipal assistance were defined in regulations. The provincial contribution for municipalities paying assistance on the basis of need was increased from sixty-six and two-thirds per cent to seventy-five per cent or more of costs, depending on the fiscal capability of the municipality.

The province assumed full responsibility for costs of supervisory services for children in the care of Children's Aid Societies. The level of provincial and municipal contributions for the cost of protection services

for children was increased.

Physicians' services were extended to recipients of provincial disability pensions and long-term recipients of municipal assistance.

NEW BRUNSWICK

General Assistance

General assistance is provided under the Social Welfare Act which came into effect on January 1, 1967. Under this program, assistance can be provided to any person in need, including persons formerly granted provincial or municipal assistance. Benefits are determined on the basis of budgetary allowances set by regulation for items of basic need which include set amounts for food, clothing, household and personal items, and maximum amounts for shelter, fuel and utilities. Provision is also made for items of special need. The program is administered by the province through a network of twenty district offices.

Health Care Services

Health care services are provided under the Social Welfare Act to recipients of assistance and include physicians' services, surgery, obstetrics and specialists' services. A medical card is issued to recipients, and services are made available through an agreement between the province and the New Brunswick Medical Society. Additional provision is made for other health needs, including diagnostic services and prescribed drugs.

Institutional Care

Needy persons requiring institutional care are assisted under the Social Welfare Act to meet the costs of care in homes for the aged, nursing homes and other types of residential welfare institutions. These homes are licensed under the Auxiliary Homes Act and the Health Act. Rates are established in each home in accordance with the level of care provided and are approved by the provincial Director of Welfare.

During the year, 133 institutions providing domiciliary or nursing care and having a total of 1,839 beds were listed as homes for special care under the federal cost-sharing agreement.

Child Welfare

Federal contributions are being made toward the cost of maintaining children that are placed in foster homes and child care institutions under the authority of the Child Welfare Act. Since January 1, 1967, the province has been responsible for the maintenance of all children in care. Payment is based upon daily board rates which vary from $1.35 to $1.60 per day, depending on the age of the child, with additional amounts being paid for clothing, health services, education and other requirements.

Welfare Services

New costs for which contributions to welfare services are made under the Canada Assistance Plan are related to the administration of the provincial Department of Youth and Welfare. They include costs of administering assistance under the Social Welfare Act and of providing related welfare services and extending child care and protection services. Services are provided directly by the province through its district offices.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

The province proclaimed a new Social Welfare Act effective January 1, 1967, under which the provincial Department of Youth and Welfare became responsible for providing assistance to any person in need. The new program replaced the former provincial assistance program under which aid was granted to needy mothers on the basis of a means-test and the municipal assistance program through which aid was provided to other needy persons.

The province enacted a new Child Welfare Act which also came into effect on January 1, 1967. Under this legislation, the province assumes responsibility for maintenance of children and provision of child welfare services formerly administered through Children's Aid Societies.

QUEBEC [1]

General Assistance

General assistance is provided under the Public Charities Act and Regulations. This program includes assistance to the unemployed, assistance to widows and spinsters aged 60-65 years, supplementation to old age security pensioners, and supplementation to recipients of categorical allowances. Assistance to needy mothers is shared under the federal Unemployment Assistance Act.

Assistance is determined in accordance with an extensive list of basic needs, with variable rates for food, clothing and fuel, and fixed rates for personal and household needs. Actual costs are paid for shelter and utilities. Assistance levels are based upon factors such as size of family and locality, thereby taking into account higher costs in larger centres such as Montreal and Quebec City.

The assistance program is administered by the Social Allowances Commission and the Social Assistance Services Directorate through regional offices of the Department of Family and Social Welfare, and by municipal and social welfare agencies.

Health Care Services

Medical care is provided to recipients of most classes of assistance. The

program is authorized by the Medical Assistance Act and operates under an agreement between the province and medical associations. Assistance recipients are issued with medical assistance cards which entitle the holder to physicians' services, including medical and surgical services and certain diagnostic services. Drugs and other required services are provided as items of assistance under the Public Charities Act.

Institutional Care

Needy persons requiring institutional care are maintained in homes for the aged, nursing homes and other types of residential care institutions which are operated by religious and charitable organizations or are under private ownership. Licensing and supervision is carried out by the Department of Family and Social Welfare or by the Department of Health. Maximum rates for maintenance are set by order-in-council in accordance with the levels of care provided by the home and required by the resident.

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(1) Federal financial support of the programs covered under the Canada Assistance Plan Agreement with Quebec is provided under the terms of the Established Programs (Interim Arrangements) Act.

During the year, 486 institutions providing domiciliary or nursing care and having a total of 18,530 beds were listed as homes for special care under the federal cost-sharing agreement.

Child Welfare

Federal contributions are made toward the costs of care and maintenance of children in child welfare institutions or in the care of social agencies under the terms of the Public Charities Act. Full financial responsibility for the municipal share of child welfare costs has been borne by the province since April 1, 1966. Child care may be provided in a variety of children's institutions, foster homes, or private day nurseries. The full range of services spans the field from general supervision and care of normal children to the training of retarded children and includes intensive treatment and protection for children with psychological problems.

Welfare Services

Federal contributions are being made for new costs of welfare services provided primarily under the Public Charities Act, the Social Allowances Commission Act and the Adoptions Act by the Department of Family and Social Welfare, by social welfare agencies, and by municipal departments of welfare.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

During the year, the province enacted the Medical Assistance Act to provide medical care for needy persons. Under this new program, medical and surgical care and certain diagnostic services are provided to most classes of recipients of assistance under the Public Charities Act, the Needy Mothers Assistance Act, and the categorical allowance Acts.

The Department of Family and Social Welfare initiated the payment of a comforts allowance to needy persons in hospitals and sanatoria.

Maximum per diem rates were raised for certain types of institutional care for children and adults.

The province assumed responsibility for the municipal share of costs of placement of children in institutions and foster homes under the Public Charities Act.

ONTARIO

General Assistance

During the year there were three programs of a general assistance nature in effect in Ontario.

The mothers' allowance program provides for assistance on the basis of need to widows, deserted wives, and unmarried women with dependent children. Benefits are determined on the basis of pre-added budgets intended to cover food, clothing, household maintenance and sundries according to family size and composition, with additional provisions for fuel and shelter. Similar provision is made, under the dependent fathers assistance program, for the payment of allowances to families in which the father is unemployable. These programs are administered directly by the province through its eighteen regional offices.

In addition to the categorical programs of old age assistance and blind and disabled persons allowances, the province administers a widows pension program for widows and single women over the age of sixty years, the costs of which are shared by the federal government under the Unemployment Assistance Act.

Persons not able to qualify under provincial programs are assisted under the municipally administered general welfare assistance program. Municipal assistance is also provided on the basis of need, using pre-added budgets and maximum shelter and fuel allowances set by the province. Under this program, provision is also made for granting supplementary assistance to recipients of old age security and categorical allowances. Municipalities are reimbursed by the province for eighty per cent of the cost of providing assistance.

Health Care Services

Physicians' services, including medical, surgical and obstetrical services, are provided to recipients of provincially administered benefits and municipal general welfare assistance through the Ontario Medical Services Insurance Program. Dental services for children of mothers' allowance recipients are provided by the province through an agreement with the Royal College of Dental Surgeons. Other health care services are provided on a supplementary basis by municipalities under the authority of the General Welfare Assistance Act.

Institutional Care

Institutional care for needy persons is provided through a number of programs in the province:

- elderly persons are cared for in sixty-four homes operated by cities, counties, and districts under the Homes for the Aged and Rest Homes Act. The province reimburses municipalities for eighty per cent of net costs of providing care for needy persons in such homes;
- aged, infirm and other persons are also cared for in eighty-two institutions operated by voluntary and religious organizations under the Charitable Institutions Act. The province, during the year under review, reimburses such homes for seventy-five per cent of their net costs not exceeding the maximum established rates of $4 per day for normal care and $6 per day for bed care;
- assistance to cover the costs of care in proprietary boarding homes and nursing homes is provided by municipalities through the General Welfare Assistance program, with provincial contributions amounting to eighty per cent of costs up to $115 per month for sheltered care and eighty per cent of costs up to $140 per month for nursing care.

During the year, 629 institutions of the types described, with a total of 23,684 domiciliary and nursing beds, were listed as homes for special care under the federal cost-sharing agreement.

Child Welfare

Federal contributions are made toward the costs of maintaining children placed in foster homes and in child care institutions under the authority of the Child Welfare Act, including the costs of caring for children placed by some fifty-four Children's Aid Societies in the province. Under this Act, the province reimburses the Societies for one hundred per cent of the costs of maintaining children of unmarried parents and sixty per cent of the costs of maintaining other children, with the remaining forty per cent being paid by municipalities.

Welfare Services

Federal contributions are made toward new costs of welfare services provided by three kinds of agencies in the province,–namely, the administration of assistance and the provision of welfare services through the provincial Department of Public Welfare; the cost of administering the General Welfare Assistance and other programs through about seventy municipal welfare departments; and the cost of providing child welfare services, including supervision of children in care, adoption services, protection services and services to unmarried mothers, through Children's Aid Societies in the province.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

The province enacted legislation for the Family Benefits program which came into effect on April 1, 1967. Under this program, allowances are provided to needy families, including those in which the husbands are unemployed, widows and single women over the age of sixty years, and persons formerly granted old age assistance and blind and disabled persons allowances.

Recipients of provincial allowances were transferred from the province's medical plan to the Ontario Medical Services Insurance Plan and coverage was extended to recipients of municipal general welfare assistance.

The provincial contribution toward the cost of maintaining children in the care of Children's Aid Societies was increased from forty per cent to sixty per cent.

The municipal homes for the aged program was extended to provide for the construction and operation of rest homes for incapacitated persons requiring care on a long-term basis.

The level of provincial contributions toward the maintenance of needy persons in charitable institutions was increased from seventy-five per cent to eighty per cent of costs effective in April 1967.

The province adopted new day nurseries legislation.

The title of the Department of Public Welfare was changed to the Department of Social and Family Services to reflect to increased emphasis on welfare services.

MANITOBA

General Assistance

General assistance is provided through two programs,–namely, provincial social allowances and municipal social assistance.

Social allowances are provided to needy mothers and to persons who require assistance because of physical or mental ill health or incapacity that

is likely to last for more than ninety days. Benefits are determined on the basis of budgetary amounts for food, clothing, fuel, utilities, household and personal needs, and shelter. The social allowance program is administered directly by the province through a network of eight regional offices.

Assistance is provided by municipalities on a short-term basis to persons not covered by the provincial social allowance program. This assistance is also provided on a needs-test basis using budget scales set by each municipality. The province reimburses municipalities for expenditures for assistance under a formula set out in the Social Allowance Act.

Health Care Services

Medical services are provided to social allowance recipients, wards, and residents of unorganized territory under an agreement with the Manitoba Medical Association. Dental care, optical care and prescribed drugs are also provided. Recipients of municipal assistance are dependent upon health care provisions made by the individual municipality.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in paying for their care through the social allowances program. In most instances, the care is provided in voluntary and proprietary homes located throughout the province.

The institutional care program is administered by Care Services, a joint office of the Departments of Health and Welfare which is responsible for the development, licensing and inspection of homes and for the placement of individuals requiring special care.

During the year, eighty-three domiciliary and nursing homes containing 4,515 beds were listed as homes for special care under the federal cost-sharing agreement. Payments are based upon rates that are set for each of the homes in accordance with the level of care provided.

Child Welfare

Federal contributions are made toward the cost of caring for children that are placed in foster homes, group homes, and child care institutions under the authority of the Child Welfare Act. Payments during the year included costs for children placed in care by the province, by the four Children's Aid Societies in the province, and by the Jewish Child and Family Service. Payments are based upon rates determined by an advisory committee established under the Child Welfare Act.

Welfare Services

Federal contributions are made toward the cost of new welfare services

provided by the provincial Department of Welfare which administers social allowances and provides other welfare services through a network of regional offices, by three municipal departments of welfare which are responsible for the administration of assistance and the provision of associated welfare services, and by four Children's Aid Societies providing child care, protection and adoption services.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

The province undertook to make contributions toward new welfare service costs to municipalities which meet certain criteria, including the operation of a needs-test assistance program, the provision of appeal procedures for recipients, the employment of full-time welfare staff, and the payment of assistance to all applicants who are in need, but who may lack residence in the municipality.

The province agreed to pay eighty per cent of the cost of approved work activity projects operated by those municipalities which are entitled to reimbursement for welfare service costs.

Food rates under the social allowances program were increased in accordance with increases in the cost-of-living.

Per diem maintenance rates for children were increased during the year.

Regulations were made under the Elderly and Infirm Persons Housing Act to provide for standards, inspection and licensing of homes for the aged and infirm.

SASKATCHEWAN

General Assistance

General assistance is provided under the Saskatchewan Assistance Plan through which assistance may be granted to any person in need.

Benefits for long-term recipients are determined on the basis of budgetary allowances for basic maintenance, which include food, clothing, shelter, fuel, utilities and household and personal needs. Benefits for short-term assistance are based upon a pre-added budget covering all items except shelter for which actual expenditures are met. Provision is also made for granting assistance to cover a variety of items of special need, including household equipment, housekeeping allowances, and items incidental to education or employment.

The Saskatchewan Assistance Plan is administered by the provincial Department of Welfare through its regional offices, except in the municipalities of Prince Albert and Moose Jaw where assistance is granted through

municipal social service departments.

Health Care Services

Health care services are provided to persons who qualify for assistance under the Saskatchewan Assistance Plan. The benefits include physicians' services, diagnostic services, laboratory procedures and dental surgery, all of which are provided through the universal medical care program administered by the Medical Care Insurance Commission. Additional benefits, such as optical and dental services (including eye glasses and dentures), physiotherapy, chiropody, drugs and appliances are provided when required through the Medical Services Division of the Department of Health.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes, homes for unmarried mothers and other types of residential welfare institutions are assisted in meeting the costs of such care through the Saskatchewan Assistance Plan. These homes are licensed and inspected by the Department of Welfare under the Housing and Special Care Homes Act. A large proportion of such homes have been constructed in recent years with the assistance of long-term, low-interest loans under the National Housing Act and are operated by voluntary groups or municipal corporations.

During the year, there were ninety-two institutions containing a total of 3,849 nursing and domiciliary beds which were listed as homes for special care under the federal cost-sharing agreement. Maximum rates payable were $165 per month for supervisory and limited personal care and $235 per month for nursing care.

Maintenance of Children

The child care program is administered directly by the provincial Department of Welfare through its regional offices. Payments are made for maintenance, health care and other needs of children who have been placed in foster homes, group homes or child care institutions under the authority of the Child Welfare Act. Such care is provided to children who are found by the courts to be neglected and to children voluntarily committed to the Crown by their parents.

Welfare Services

Federal contributions are made toward the new costs of welfare services provided by the provincial Department of Welfare and the Social Service Departments of the cities of Moose Jaw and Prince Albert. Contributions in the provincial department go toward the costs of administering the Saskatchewan Assistance Plan and of providing associated welfare services through fourteen regional offices and sub-offices and the cost of

providing child welfare services, including supervision of children in care, protection services and adoptions.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

The Saskatchewan Assistance Plan was introduced on April 1, 1966 to provide assistance to any person requiring aid on a long- or short-term basis, including persons formerly receiving municipal social aid, aid to dependent families, and supplementary allowances.

The province ceased to accept applications for old age assistance and blind and disabled persons allowances and transferred recipients able to qualify for equivalent or greater benefits to the Saskatchewan Assistance Plan.

Assistance rates were increased under the Saskatchewan Assistance Plan.

The provincial Department of Welfare assumed responsibility for the administration of assistance in all parts of the province except Prince Albert and Moose Jaw which elected to retain responsibility for this function.

Comprehensive regulations setting standards for the construction and operation of homes for special care were adopted under the Housing and Special Care Homes Act, 1965.

ALBERTA

General Assistance

General assistance is provided through the provincial social allowance and social assistance programs and through the municipal assistance program.

Social allowances are granted to needy mothers and to other persons who are in need because of age, physical or mental ill health or incapacity likely to last more than ninety days. Benefits are based upon rate schedules for food and clothing which are adjusted annually to reflect changes in the costs of living. Allowances for shelter, fuel and utilities are paid up to levels accepted as the standard for health and decency in the community in which the recipient lives. The social allowance program is administered directly by the provincial Department of Public Welfare through a network of thirty regional offices.

The provincial department also administers a social assistance program for those requiring short-term aid. Benefits are determined on a basis similar to that for social allowances.

Municipal assistance is provided on a short-term basis to persons resident in the community who do not qualify under the provincial social allowance program. Eligibility is determined through an assessment of need

using budgetary standards which are set at the discretion of municipalities. The province reimburses municipalities for eighty per cent of their expenditures for assistance.

Health Care Services

During the year under review, social allowance recipients are granted medical cards which entitle them to a range of health care services, including medical, psychiatric, chiropractic, dental and optical services. Medical and psychiatric services are provided under an arrangement with the provincial College of Physicians and Surgeons. Assistance is issued to cover the costs of prescribed drugs.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in meeting the cost of such care through the social allowances program. Care may be provided in provincial, municipal or voluntary homes which are licensed and supervised under the Welfare Homes Act by the Homes and Institutions Branch of the Department of Public Welfare or in proprietary nursing homes licensed and supervised by the Department of Health under the Nursing Homes Act. A network of senior citizens lodges, built by the province and operated by the municipalities, provides domiciliary care.

During the year, 122 homes with 7,460 domiciliary and nursing beds were listed as homes for special care under the federal cost-sharing agreement. There were forty-two contract nursing homes in which the rate is $7 per day and sixty senior citizens lodges in which rates range from $60 to $75 per month.

Maintenance of Children

Child welfare services in Alberta were a responsibility of municipalities under the Child Welfare Act, with the full costs of maintenance being reimbursed by the province. Maintenance costs may include care in a foster home, at per diem rates which varied during the year from $1.70 to $2.50 per day depending on the age of the child. Costs for clothing, health care and school supplies are also met by the province.

The transferring of responsibility for child welfare services from the municipalities to the province was started during the current year.

Welfare Services

Three types of welfare services were included during the year as shareable costs under the Canada Assistance Plan Agreement,–namely:

– direct services provided through the regional offices of the provincial Department of Public Welfare, including the administration of the social

allowance and social assistance programs and the provision of child care and family services;

- the administration of assistance and the provision of child welfare services through municipal departments of welfare in ten major municipalities;
- the development of the new Preventive Social Services program in a number of communities.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

During the year, the province continued its practice of adjusting social allowance rates on April 1st to reflect increases in the cost of living.

The transfer of responsibility for the administration of child welfare services from municipalities to the province was started.

A Preventive Social Services program was introduced in an effort to reduce dependency and the need for child welfare services. Under the program, provincial support was provided for the appointment of municipal Directors of Preventive Social Services responsible for encouraging the development and co-ordination of services such as family counselling, family life education, homemaker and day-care services and community development. The province contributes eighty per cent of the costs of approved services.

BRITISH COLUMBIA

General Assistance

Two general assistance programs are operated in the province - namely, social allowances and supplementary social allowances.

Social allowances are paid to any needy person requiring assistance on a short- or long-term basis, except persons eligible for old age assistance or blind or disabled persons allowances which the province continued to grant during the year. Budgets are determined on the basis of rate scales set by the province covering food, clothing, household operation and sundry expenses, and shelter costs. The program is administered through regional and district offices of the Department of Social Welfare, except in thirteen major municipalities where administration is undertaken through municipal departments of welfare.

Supplementary social allowances may be granted to recipients of old age security, old age assistance, and blind and disabled persons allowances and are paid on the basis of need up to established income ceilings. Such ceilings at the end of the fiscal year are $135 for a single old age security recipient and $240 for a couple. For recipients of categorical allowances, they are $105 for a single person and $210 for a couple. The program is

administered by the provincial Old Age Assistance Board, with applications being accepted through the regional offices of the Department of Social Welfare.

Health Care Services

Health care coverage is provided by the issuance of a medical card to long-term recipients of social allowances and persons receiving supplementary social allowances. Physicians' services, including medical, surgical and obstetrical care, are made available through an agreement between the province and the British Columbia Medical Association. Other services provided include eye examinations and prescribed drugs to the extent covered in a drug benefit list. Basic dental care is provided under an agreement with the provincial Dental Association in cases where it is specifically authorized by the department.

Institutional Care

Needy persons who require care in homes for special care are assisted in meeting the costs of this care through the social allowances program. Care may be provided in homes for the aged and other types of "boarding homes" licensed under the Welfare Institutions Licensing Act and in nursing homes that are licensed under the Private Hospitals Act. During the year, 399 boarding homes with 5,939 beds and seventy-two nursing homes with 3,239 beds were listed as homes for special care for federal cost-sharing purposes. Maximum assistance rates paid were $95 per month for boarding home care and $215 per month for nursing home care.

Child Welfare

Federal contributions are made toward the cost of care provided to children who have been placed in foster homes, group homes and child care institutions under the authority of the Protection of Children Act. The costs shared included maintenance payments to foster parents which varied from $50 to $75 per month depending on the age of the child, and clothing allowances, health care services and school supplies. The child care program is administered by Children's Aid Societies in Victoria and Vancouver and through the district offices of the Department of Social Welfare in other parts of the province.

Welfare Services

Federal contributions are made toward new costs of welfare services provided through the provincial Department of Social Welfare, including costs of administering social allowances and supplementary social allowances and providing related child and family welfare services through a regional office structure which includes forty-four district offices. They are also made for the costs of administering assistance and providing services through

thirteen municipal welfare departments and of providing adoption, protection and other child welfare services through the three Children's Aid Societies located in Victoria and Vancouver.

Significant Developments during 1966-67 relating to the Canada Assistance Plan

Following the implementation of the guaranteed income supplement for old age security recipients, the province raised the level of support available to such persons under its supplementary social allowances program. Income ceilings were raised accordingly from $105 to $135 per month for single persons and from $210 to $240 per month for couples.

Government
Publications

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Canada Assistance Plan

ANNUAL REPORT

1967-68

DEPARTMENT OF NATIONAL HEALTH AND WELFARE, CANADA

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ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1968

His Excellency the Right Honourable Roland Michener,
Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to your Excellency the Annual Report on the administration of the Canada Assistance Plan for the fiscal year ended March 31, 1968.

Respectfully submitted,

John Munro
Minister of National Health and Welfare

The Honourable John Munro, P.C., M.P.,
Minister of National Health and Welfare,
Ottawa.

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1968.

Respectfully submitted,

Joseph W. Willard,
Deputy Minister of National Welfare

ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1968

The Canada Assistance Plan, for which preparatory work began in 1963, was enacted by Parliament and came into operation during 1966-67. It received Royal Assent on July 15, 1966, with retroactive effect to April 1st of that year.

The Plan is a measure for supporting the integration, broadening and improvement of provincial and municipal public assistance programs and encouraging the extension and development of welfare services. Under it, contributions amounting to fifty per cent of shareable costs are made toward provincial and municipal expenditures for public assistance and welfare services.

Following enactment of the Plan, Regulations under Part I were developed in close collaboration with the provinces and were adopted by the Governor-in-Council on February 8, 1967. All provinces had signed Agreements under the Plan by August, 1967.

Agreements under Part III of the Plan, which relates to work activity projects, were developed during 1967-68 and Regulations formulated to permit federal sharing in the cost of such projects.

During the year members of the staff of the Division provided consultative services to the provinces and met with provincial officials to clarify procedures and deal with problems resulting from the implementation of the Canada Assistance Plan.

Work continued on the development of Agreements under Part II of the Canada Assistance Plan which covers Indian Welfare. However, no Agreements had been signed under this Part at the end of the year.

OBJECTIVES AND MAIN FEATURES OF THE PLAN

The Canada Assistance Plan has two primary objectives. These are to support the provision of adequate assistance to persons in need and to encourage the development and extension of welfare services designed to help prevent and remove the causes of poverty and dependence on public assistance.

The Plan, and the Regulations and Agreements under it, are the result of close and continuing federal-provincial collaboration at the ministerial and official levels. This collaboration is being continued in the administration of the Plan.

The following are the main features of the Canada Assistance Plan:

Comprehensive Approach

The Plan supports the development of integrated, comprehensive general assistance programs, thus enabling provinces to meet the varying requirements of different groups within one program and administrative framework. Where there were formerly four federal-provincial assistance programs - for the aged, the blind, the disabled, and the unemployed - the Canada Assistance Plan makes it possible for the provinces, at their option, to combine these into a single program.

Assistance on the Basis of Need

The Plan provides for granting of assistance on the basis of an assessment of a person's budgetary requirements as well as his income and resources, rather than, as in the "categorica programs, on the basis of income and resources only. No uppe limit is placed on the benefits for which federal contributions are available.

Supplementation of Income

An important feature of the Plan is that it provides for federal contributions toward the costs of supplementary payments over and above benefits paid under income maintenance

programs such as old age security (which includes the guaranteed income supplement), the Canada Pension Plan, the Quebec Pension Plan, and Unemployment Insurance.

Health Services

Through the Plan, the federal government shares in the cost of health care services for persons in need. These can include medical and surgical services, nursing, dental and optical care, including dentures and eye glasses, drugs, prosthetic appliances and other health services. To the extent that medical services are covered under the national Medicare program in any province, the sharing provisions of the Plan are not applicable.

Mothers' Allowances and Child Care

The Plan provides federal sharing in the costs of mothers' allowances, that is, programs providing aid to needy mothers and their dependent children. With the exception of one province, this form of aid has been incorporated into general assistance programs administered by the provinces. Federal sharing is also extended to cover costs of maintaining children in the care of child welfare authorities.

Institutional Care

The Plan also provides for federal sharing in the cost to the provinces and municipalities of maintaining needy persons in a wide range of residential welfare institutions, known collectively as homes for special care. These include homes for the aged, nursing homes, homes for unmarried mothers, hostels for transients and child care institutions.

Administration and Welfare Services

The Plan provides contributions toward the costs of strengthening and extending the administration of public assistance programs and associated welfare services. The services that can be supported include rehabilitation services, casework, counselling and assessment, adoption services, homemaker and day-care services, and community development.

Indian Welfare

Federal-provincial Agreements are authorized under Part II of the Plan to provide for the extension, with the consent of Indian bands, of provincial welfare programs to Indians living on reserves or in unorganized territory in the provinces. The Plan provides for federal sharing on the basis of a special financial formula that takes into account the higher expenditures incurred by the provinces in assuming this responsibility.

Work Activity Projects

Provision is made under Part III of the Plan for special work activity programs to help improve the motivation and work capacity of persons who have not been able to take full advantage of training opportunities, or who have unusual difficulty in securing or retaining employment.

BACKGROUND AND DEVELOPMENT OF THE PLAN

Previous Public Assistance Legislation

The Canada Assistance Plan has its roots in the public assistance programs which are being consolidated under it, particularly the four federal-provincial programs of old age assistance, blind persons allowances, disabled persons allowances and unemployment assistance. These shared-cost programs, the result of forty years of development, were preceded by a variety of measures to aid the poor. Some of these date back to the early history of the provinces, but with the advance of industrialization at the end of the nineteenth and the beginning of the twentieth century, public assistance programs began to assume major dimensions. It was then that it became necessary for the provincial and federal governments to accept responsibilities previously carried by voluntary agencies and institutions or by municipalities.

Initially the senior governments left responsibility for general assistance with the municipalities and gave special attention to readily definable groups regarded as having strong claims to aid on a more assured basis. An early example of

such groups was widows with dependent children for whom provincial mothers' allowances programs were introduced during and after the First World War.

The enactment of the Old Age Pensions Act in 1927 marked the beginning of federal-provincial co-operation in the provision of assistance to a special group. Under the Act the federal government undertook to pay half the cost of pensions of up to $20 per month granted by a province to persons 70 years of age and over who met the residence requirements and means test set out in the federal Act.

The most significant amendment to the Old Age Pensions Act was the extension of coverage in 1937 to blind persons forty years of age and over. In 1951 the Act was replaced by two federal-provincial programs - the Old Age Assistance Act covering persons between the ages of 65 and 70, and the Blind Persons Act covering blind persons over the age of 21 (reduced in 1955 to age 18). In the same year the federal Old Age Security Act was passed providing a universal flat rate pension for persons 70 years of age and over.

A third federal-provincial program designed for the permanently and totally disabled was adopted in 1951 with the enactment of the Disabled Persons Act. It also employed a means test under which the applicant's income and property were taken into consideration in determining eligibility for a pension and, like old age assistance, it provided for a federal contribution of 50 per cent of assistance granted. The Blind Persons Act differed in that it provided for a federal contribution of 75 per cent and allowed higher income ceilings in determining eligibility.

Historically, the federal government made grants to provinces and municipalities for general assistance in two periods of economic depression. The first occurred just after the First World War and the second during the 1930's. During the latter grants were made on a large scale to meet assistance costs resulting from massive unemployment.

To avoid a similar situation after the Second World War, the federal government established a national contributory unemployment insurance program in 1940, with contributions

beginning July 1, 1941. In 1945, as part of a comprehensive post-war plan of reconstruction, the federal government also proposed the establishment of an unemployment assistance program which it would finance and administer in conjunction with unemployment insurance. However, the federal and provincial governments failed to reach agreement on the 1945 proposals and no action was taken on unemployment assistance until 1956.

In that year, the Parliament of Canada enacted the Unemployment Assistance Act which, contrary to the approach proposed in 1945, provided for a shared-cost program under which assistance would continue to be administered by the provinces and their municipalities. The Act initially contained a population threshold feature under which federal contributions began only when the number of persons receiving assistance exceeded a stated percentage of the population; this was designed to limit federal sharing to the costs of assisting the employable unemployed. In 1957, the threshold was removed and the measure moved in the direction of becoming a general assistance program, although it retained a number of important exclusions which caused it to fall well short of being a comprehensive assistance measure.

The unemployment assistance program differed from the three categorical allowance programs in that it did not specify the conditions of eligibility under which assistance had to be granted, except for the requirement of being unemployed and in need, and it placed no ceiling on the rates of assistance to be shared. The provinces were thus free to develop their general assistance programs along lines best suited to their needs. With the stimulation of federal funds, the provinces made extensive improvements in the coverage and benefits provided under their general assistance programs in the period from 1956 to 1966, and the groundwork was laid for the adoption of a single assistance measure through which help could be provid on the basis of need to any person requiring it.

Development of the Plan

At the federal-provincial conference called in September 1963 to discuss the development of a new contributory wage-related social security measure, the Canada Pension Plan,

it was recognized that there was also need for an improved public assistance program. This view was expressed in the closing communiqué of the conference which proposed that "the whole field of social assistance should be jointly re-examined in the hope of developing one general assistance program based on need." The question was further considered at the federal-provincial conference of Prime Ministers and Premiers in November 1963, which recommended the establishment of "a federal-provincial working group to review the operation of all joint welfare programs, in preparation for further discussion by Ministers."

As a result of that recommendation, a working party of federal and provincial Deputy Ministers of Welfare and other officials met in February 1964 to identify the issues that would have to be considered in developing an improved assistance program. In May 1964, the Ministers of Welfare, under the chairmanship of the Minister of National Health and Welfare, met in Ottawa to review the proposals of the working group. They recommended that the federal government and the provinces "should work toward an integrated, comprehensive general assistance program based on meeting need." The provincial Ministers also recorded their view that the federal government should "share fully in the costs of mothers' allowances, health services and administration."

An additional factor that supported the development of more effective assistance and welfare service programs was the growing concern that was being expressed about problems of poverty. It was increasingly recognized that the talents of many Canadians were being wasted because of poverty, illness, inadequate education and training, and inequality in opportunities for work. In developing its legislative program in 1965, the government concentrated particularly on bringing forward a group of measures designed to combat these problems by improving the opportunities of people affected by them. The aim of the programs was to achieve the full utilization of the nation's human resources and the elimination of poverty.

One of the government measures referred to in the Speech from the Throne in April 1965 was the Canada Assistance Plan. It was described by the Prime Minister as a means of providing a framework for federal-provincial co-operation in helping

those who need help the most. He noted that a number of the provinces had expressed their wish to develop a comprehensive general assistance measure under which the varying requirements of different groups could be met through one program. He emphasized that the objectives of the program would be to encourage the provision of adequate levels of assistance to persons in need and to support the development of social welfare services to assist such persons in achieving the greatest possible measure of self-support.

The government's proposals for the Canada Assistance Plan were thoroughly reviewed at a second meeting of Ministers of Welfare held in April 1965, and the basic features of the Plan were approved. The provincial Ministers welcomed the Plan "as providing a basis for a new and more flexible approach to public welfare in Canada." A number of technical problems were noted during the discussion, and it was agreed that meetings of federal and provincial officials should be continued. At a third meeting of Ministers of Welfare held in January 1966 additional suggestions relating to the coverage of the Plan were made, including proposals for its extension to children and youth in the care of child welfare authorities. The extensive federal-provincial collaboration in the development of the Plan ensured its relevance to varying conditions across Canada and its acceptability to the provinces which carry administrative responsibility for the programs supported by it.

A motion for the introduction of the Canada Assistance Plan Bill was placed before the House of Commons on April 4, 1966; the Bill passed first reading on June 21st and, after extensive debate, received third reading in the House of Commons on July 8th and in the Senate on July 12th. Notice of Royal Assent to the Bill was given in the Canada Gazette on July 23rd.

Development of Regulations and Agreements

Following the enactment of the legislation, extensive consultations were held with the provinces concerning the Regulations and Agreements under the Plan. This included official discussions held in each of the provinces to obtain provincial views on the proposed Regulations and Agreements and their impact on provincial programs and plans.

The Regulations, which were adopted by Order-in-Council on January 26, 1967, provided further definitions of terms as required by the legislation, outlined the kinds of costs for which contributions could be made, and indicated the basis for payment of claims under the program. These were carried forward into the Agreements which outline the undertakings by the provinces and Canada under the Plan. The dates on which Agreements under Part I were made with the provinces are indicated below. These Agreements were retroactive to April 1, 1966.

Newfoundland	March 30, 1967
Prince Edward Island	March 30, 1967
Nova Scotia	March 22, 1967
New Brunswick	April 5, 1967
Quebec*	August 21, 1967
Ontario	March 28, 1967
Manitoba	March 20, 1967
Saskatchewan	March 22, 1967
Alberta	March 30, 1967
British Columbia	March 23, 1967

APPLICATION OF THE PLAN

Assistance to Persons in Need

A primary objective of the Plan is to support the provision of adequate assistance to persons in need. Contributions are made under it toward the cost of assistance granted on the basis of a needs-test - that is, a test under which the budgetary requirements, as well as the income and resources, of applicants and their dependents are taken into account. This is in contrast to the means-test under which only income and assets computed as income are taken into account within set benefit and income ceilings.

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* The Agreement with Quebec involves Section 19 of the Canada Assistance Plan which provides that the terms of the Established Programs (Interim Arrangements) Act apply to the Plan, rather than to the four pre-existing shared-cost public assistance programs.

The major costs of assistance for which contributions are made under the Plan are for basic requirements which are defined in the legislation to include food, shelter, clothing, fuel, utilities, household supplies and personal requirements. When provinces enter agreements under the Plan, they agree to take these requirements into account in determining eligibility for assistance. Allowances for items such as food, clothing, household supplies and personal requirements are usually based on rate scales set by the provinces on the basis of budget studies. These allowances vary with family size and composition. For other budgetary items such as shelter, fuel and utilities, actual costs to the recipient are generally used.

The rehabilitative emphasis in the Plan is evident in its provision for contributions toward the costs of welfare services purchased for persons in need and items of special need obtained for such persons. Welfare services, which can be purchased on a fee-for-service basis, may include rehabilitation services, casework, counselling and assessment services, and home-maker and day-care services. The items of special need toward which contributions can be made include tools or equipment that are essential in enabling a recipient to obtain employment and items necessary for his safety, well-being or rehabilitation. These include household equipment and furnishings, repairs to property, special food or clothing and items required by disabled persons.

Expenditures for items of special need exceeding $500 in cost require the approval of the Director of the Canada Assistance Plan. Contributions were made during the year for such items as building supplies for repairs and additions to dwellings, installation of furnaces and plumbing, household furnishings, prostheses, and wheel chairs and attachments for quadraplegics.

The Plan is designed to support the provision of assistance to any person in need, whatever the cause of his need. The legislation does identify, however, the major groups to whom assistance will be provided. These are described as persons who are unable to provide adequately for themselves because of inability to obtain employment, loss of the principal family provider, illness, disability or age. Other persons such as those who are employed but require supplementary help may also be assisted.

The programs through which assistance is granted are variously known in the different provinces as social assistance, social allowances, general assistance, family benefits and general welfare assistance. The patterns of administration for these programs vary from province to province. In two provinces, Newfoundland and New Brunswick, the province has assumed total responsibility for assistance administration, and this is also true in Saskatchewan, except for two municipalities. In the provinces of Nova Scotia, Manitoba, Alberta and Ontario, assistance is provided through a combination of provincial and municipal administration. A similar pattern is found in Prince Edward Island, British Columbia and Quebec. However, in Prince Edward Island two welfare bureaus in Charlottetown also administer assistance. In British Columbia supplementary social allowances are administered by the Old Age Assistance Board and, in Quebec, social welfare agencies administer assistance in some parts of the province. In provinces where both the province itself and its municipalities provide assistance, persons expected to be in need on a long-term basis are usually assisted through provincial programs, while those whose needs are of shorter duration are assisted by municipalities.

Maintenance of Children

The assistance provisions of the Plan also cover children under the age of twenty-one who are in the care or custody or under the control or supervision of child welfare authorities. This extends to children, most of whom are in foster homes, that have been placed in the care of such authorities by court order or by agreement with the parents. The assistance costs for which contributions can be made include foster home payments, frequently based on standard rates for various age groups, health care services and other needs of children. The programs covered include those administered by provincial child welfare authorities and through children's aid societies.

In the provinces of Newfoundland, Prince Edward Island, New Brunswick, Quebec and Saskatchewan the provincial departments of welfare are responsible for the administration of child welfare programs. This responsibility is borne by the provincial authorities together with children's aid societies in Ontario, British Columbia, Manitoba, and Nova Scotia.

In Alberta where child welfare services were formerly a municipal responsibility, this authority began to be transferred to the province in 1966-67.

Institutional Care

The costs of providing care for persons in need who are in residential welfare institutions are also covered under the Plan. These institutions are referred to as homes for special care and include homes for the aged, nursing homes, hostels for transients, homes for unmarried mothers, child care institutions and other residential institutions that have the primary purpose of providing supervisory, personal or nursing care or social rehabilitation. The Plan does not cover care provided in hospitals, correctional institutions or institutions whose primary purpose is education. The homes for special care provisions of the Plan were carried forward from the Unemployment Assistance Act and extended to cover child care institutions such as receiving homes, orphanages and specialize welfare institutions for children with physical or mental disabilities.

At the end of the year, identification of all institutions that would come within the scope of the Plan had not been completed. At that time, however, some 2,500 institutions with a capacity of more than 85,000 beds had been recognized as homes for special care.

Health Services

Under the Plan the federal government may reimburse the provinces for half the cost of health care services provided to persons in need. The definition of health care services covers medical, surgical, obstetrical, dental and nursing services, including drugs, dressings, prosthetic appliances, and other items or services associated with the provision of specified services. Excluded are insured services within the meaning of the Hospital Insurance and Diagnostic Services Act or any other prescribed hospital care services, and services covered under the Medical Care Act in any participating province.

Welfare Services

As a means of supporting the development of preventive and rehabilitative programs, the Plan authorizes contributions toward provincial and municipal expenditures for welfare services. These are described, generally, as services that have as their object the lessening, removal or prevention of the causes and effects of poverty, child neglect or dependence upon public assistance. More particularly, they include rehabilitation services, casework, counselling and assessment services, homemaker and day-care services, and community development. Services related wholly or mainly to education, correction, recreation or the provision of health or hospital care are not covered. Administrative, secretarial and clerical functions associated with the provision of welfare services and the administration of assistance are covered, as are staff training, consultation, research and evaluation associated with welfare programs. The latter are included as a means of supporting improvements in the effectiveness of personnel and encouraging assessment of programs in relation to their objectives.

An important feature of the Plan is its emphasis on prevention of the social problems that lead to poverty, family breakdown and the need for public assistance. Thus, contributions can be made for costs of welfare services extended not only to persons in need, but also to persons who may become needy if they do not receive such services.

The Plan is intended to encourage the improvement of existing services and the development of new ones. In view of this, contributions are made toward provincial or municipal expenditures for welfare services that are in excess of those incurred during a period referred to as the base year; in the case of provinces, this is the fiscal year 1964-65. The types of cost that are shared are salaries and fringe benefits, travel costs, including attendance at conferences and seminars, certain costs of staff training and development, and fees for consultation and research.

Contributions are made when services are provided through departments or agencies that have been recognized as provincially approved agencies under the Plan. Most of the agencies in which costs are shared are provincial and

municipal departments of welfare, the latter varying in size from departments employing only one or two officers to those in metropolitan areas employing several hundred persons. Contributions are also made, however, toward costs incurred by voluntary agencies to the extent that these are supported from provincial or municipal funds. These include children's aid societies, family bureaus and other agencies providing child care, family counselling, homemaker and day-care services. Some 240 voluntary agencies are recognized for cost-sharing purposes under the Plan.

Relationship to Categorical Programs

A basic objective of the Plan is to support the development of integrated programs through which assistance can be provided to any person in need. In line with this objective, Part V of the Plan enables the provinces, at their option, to cease accepting applications for old age assistance and for blind and disabled persons allowances and begin assisting the aged, the blind and the disabled through general assistance programs. Persons who have already qualified for allowances under these programs can be transferred to a general assistance program if they will qualify for comparable or greater benefits under that program.

Saskatchewan ceased to accept applications for categorical allowances on April 1, 1966 and transferred major portions of its existing caseloads to the Saskatchewan Assistance Plan. Ontario took a similar step with effect from April 1, 1967 and transferred a major portion of its caseload to the Family Benefits program. Alberta ceased accepting applications under the categorical programs on January 1, 1968. Newfoundland ceased to accept applications for old age assistance and disabled persons allowances on December 31, 1967, and June 30, 1967, respectively, and, where possible, transferred recipients to general assistance. In Prince Edward Island, applications for old age assistance ceased to be accepted on April 1, 1967 and applications for disabled persons allowances on May 1, 1967. Part of the caseload under both programs was transferred to general assistance.

Provisions of Agreements under the Plan

In entering Agreements under the Plan, provinces have undertaken to meet a number of criteria that are called for in the legislation. They have agreed to the use of a needs test in determining eligibility for assistance and to provide assistance to any person in need in an amount or manner that takes into account his basic requirements, that is, food, shelter, clothing, fuel, utilities, household supplies and personal requirements. The needs test, which is basically a budget-deficit approach to determining eligibility for, and the amount of assistance to be provided, takes into account the budgetary requirements of the applicant as well as the income and resources he has available to meet them.

The provinces have agreed not to require a period of residence within their boundaries as a condition of eligibility for assistance. They have also undertaken to provide in their law a procedure for appeals from decisions respecting applications for assistance or the granting of assistance, and to provide for an adequate method by which that procedure will be brought to the attention of applicants for assistance or recipients of assistance.

In recognition of the preventive and rehabilitative emphasis of the Plan, the provinces have undertaken to continue, as may be necessary and expedient, the development and extension of welfare services.

Description of Provincial and Municipal Programs

The Canada Assistance Plan sets broad conditions under which the costs of assistance and welfare services can be shared. Within this general framework, however, contributions can be made toward costs of programs that are developed and administered in the manner best suited to individual provincial circumstances and preferences. Brief descriptions of the programs for which costs are shared in each province are given in Appendix "A", attached, together with a resumé of significant developments that took place in the provinces during 1967-68. The Appendix describes the programs as they stood at the end of the fiscal year.

ADMINISTRATION OF THE PLAN

The program is administered by the Canada Assistance Plan Division in the Welfare Assistance and Services Branch. This Division is also responsible for administering the unemployment assistance program and the old age assistance and blind and disabled persons allowances programs. The Division consists of administrative and consultative staff at headquarters and field staff located in nine of the provinces.

Canada has undertaken, in Agreements with the provinces, to provide consultative services, where feasible, and as requeste in areas related to the development and operation of assistance and welfare services programs. At the end of the year consultative services were available in relation to Indian Welfare, institutional care, accounting and auditing, public assistance standards, family and child welfare, community development, and staff training and development.

The field staff of the Division is responsible for carrying out administrative reviews in the field to determine the shareability of costs and for processing reimbursement claims. Field representatives are also responsible for maintaining liaison with provincial officials by advising them on interpretation of federal legislation and policies and assisting them in the preparation of claims. They also maintain contact with the Audit Services Branch which is responsible for an annual financial audit of the program.

As a result of the signing of Agreements under Part I with all provinces the main emphasis in administration was on the implementation of these Agreements especially in the areas of child welfare, health care, and welfare services, which had not been covered under the Unemployment Assistance Act. Discussions were held with provincial authorities about welfare statistics and the development of Agreements under Parts II and III of the Plan which relate to Indian Welfare and Work Activity, respectively.

Expenditures for Assistance and Welfare Services

During the year the federal government paid out $225.6 million to the provinces towards the cost of assistance granted.

This excludes Quebec which received $117.1 million under the Established Programs (Interim Arrangements) Act. Payments by province for the years 1966-67 and 1967-68 are indicated in Table I below. The number of persons assisted, by province, is shown in Table II.

During the year contributions were made also under the four other shared-cost programs administered by the Division. Expenditures under these programs amounted to $9.0 million for old age assistance, $2.3 million for blind persons allowances, $7.1 million for disabled persons allowances, and $6.1 million for unemployment assistance.

In 1966-67 expenditures amounted to $19.6 million for old age assistance, $3.4 million for blind persons allowances, $15.0 million for disabled persons allowances, and $143.3 million for unemployment assistance. The decrease in payments will continue as larger portions of the groups covered come under the provisions of the Canada Assistance Plan.

TABLE I

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN DURING FISCAL YEARS 1966-67 AND 1967-68

Province	1966-67	1967-68
Newfoundland		$ 17,901,873
Prince Edward Island		1,738,858
Nova Scotia	$ 448,674	10,263,995
New Brunswick		7,185,018
Quebec*		117,100,000
Ontario	6,931,247	100,287,774
Manitoba		15,571,938
Saskatchewan	3,115,665	13,403,926
Alberta		26,538,313
British Columbia		32,719,792
TOTAL	$10,495,586	$342,711,487

* Payments to Quebec made under the Established Programs (Interim Arrangements) Act through the Department of Finance.

TABLE II

NUMBER OF PERSONS ASSISTED UNDER THE CANADA ASSISTANCE PLAN AS OF MARCH 31, 1968

Province	Child Care	Other Recipients	Total
Newfoundland	1,790	99,898	101,688
Prince Edward Island	583	7,427	8,010
Nova Scotia	3,057	40,516	43,573
New Brunswick	2,538	50,747	53,285
Quebec	38,748	520,806	559,554
Ontario	18,032	228,782	246,814
Manitoba	2,871	39,344	42,215
Saskatchewan	2,893	30,048	32,941
Alberta	6,788	68,651	75,439
British Columbia	7,784	104,747	112,531
CANADA	85,084	1,190,966	1,276,050

APPENDIX "A"

PROVINCIAL PROGRAMS SUPPORTED DURING 1967-68 UNDER THE CANADA ASSISTANCE PLAN

As described in the body of this report, the federal government contributes toward the costs of assistance and health and welfare services provided by the provinces to persons who require them.

This appendix outlines the provincial programs through which this help was provided during the fiscal year 1967-68, together with a resumé of significant developments that took place in the provinces. The references are only to programs in effect during 1967-68, and consequently do not take into account any subsequent changes.

NEWFOUNDLAND

General Assistance

General Assistance is provided under the Social Assistance Act to unemployed persons and to persons requiring assistance on a long-term basis, including needy mothers and incapacitated persons. Benefits are determined on the basis of budgetary allowances set by regulation to cover food, clothing and personal care, fuel and rent or, in the case of a person living in his own home, household maintenance and utilities. Assistance may also be granted to cover other needs such as repairs or renovation to homes, burials, and transportation of sick and destitute persons. The program is administered directly by the Department of Public Welfare through some sixty-five district offices.

Health Care Services

Health care services are provided to persons in need by the provincial Department of Health through a variety of programs. The costs of these programs are shared under the Canada Assistance Plan and include fees for medical and nursing services to indigents, costs of drugs and supplies, services provided through the Children's Health Service, and air ambulance

services. Dental, optical and prosthetic services may be provided under prescribed conditions, as may transportation to and from medical centres.

Institutional Care

Needy persons requiring institutional care are assisted through the social assistance program in meeting the costs of care in nursing homes, homes for the aged operated under religious auspices, and in proprietary boarding homes licensed by the Department of Public Welfare. In addition, there is a 220-bed institution (Hoyle's Home) which is operated by the provincial Department of Public Welfare.

During the year, the maximum rates payable varied from $75 per month in boarding homes to $240 per month for bedridden persons in approved institutions. Fifty-five homes for adults containing over 1,000 domiciliary and nursing beds, were listed as homes for special care. In addition, one 75 bed child care institution was listed.

Child Care

Federal contributions are made toward the cost of maintaining children placed in foster and group homes under the authority of the Child Welfare Act. The foster home rates in effect at the end of the year varied from $46 to $64 per month, depending on the age of the child in care. This program is administered by the Child Welfare Division of the Department of Public Welfare through its district offices. Also covered are the costs of providing care for disabled children in the Children's Home in St. John's.

Welfare Services

Contributions under the Canada Assistance Plan are being made for new costs of welfare services provided through the provincial Department of Public Welfare. These costs include administering the social assistance program and providing associated welfare services, as well as providing child care, protection and adoption services.

Significant Developments during 1967-68
relating to the Canada Assistance Plan

Increases in social assistance and foster home rates were made on April 1, 1967. A comforts allowance of $15 per month was established for residents of long-stay homes and sanatoria.

The Welfare Institutions Licensing Act was implemented during the year.

PRINCE EDWARD ISLAND

General Assistance

General assistance is provided under the new General Welfare Assistance Act introduced during the year. Benefits are determined on the basis of budgetary allowances for requirements which include food, clothing, shelter, household and personal items, fuel and utilities. Provision is also made for assistance to cover items of special need, including housekeeping services and materials or services required in rehabilitation. The program is administered by the provincial Department of Public Welfare, two municipalities, and two Welfare Bureaus in the City of Charlottetown.

Health Care Services

The General Welfare Assistance Act provides for the granting of aid to cover the costs of health care services. Such services may include necessary medical and surgical services, nursing, dental care, optical care, essential prescribed drugs and appliances.

Institutional Care

Persons in need in nursing homes, homes for the aged, hostels and other residential welfare institutions are assisted to meet the costs of care under the welfare assistance program. Persons in care are entitled to a comforts allowance of up to $10 per month. Maintenance rates are approved by the provincial director of the welfare assistance program.

During the year, ten institutions for adults having a total of 770 domiciliary and nursing beds were listed as homes for special care under the federal cost-sharing Agreement. Provincially operated institutions account for about 600 of these beds.

Two child care institutions having a total of 80 beds were also listed as homes for special care.

Child Care

Provincial payments are made for the maintenance of children who are placed in foster homes under the authority of the Children's Protection Act. The costs include those for neglected children permanently or temporarily committed by the Courts to the care and custody of the child welfare authorities.

The child care program is administered by the Director of Child Welfare, Department of Public Welfare.

Welfare Services

Federal contributions are being made toward new costs of welfare services provided by the provincial Department of Public Welfare, including costs of administering the general welfare assistance program and of providing child care, protection and adoption services.

Significant Developments during 1967-68 relating to the Canada Assistance Plan

The province ceased accepting applications for old age assistance and disabled persons allowances on April 1, and May 1, 1967 respectively.

Changes were made in child welfare legislation related to neglect and adoption. Definitions of "neglected child" were changed and the section of the Children's Protection Act dealing with neglect as a result of physical assault or cruelty, was made more specific. Changes in the Adoption Act were of a procedural nature and included measures to facilitate co-ordination of services with out-of-province child welfare agencies.

NOVA SCOTIA

General Assistance

General assistance is provided under Parts I and II of the Social Assistance Act.

Provincial assistance is provided under Part I to needy families with dependent children, to disabled persons not able to qualify for aid under the Disabled Persons Act, and to foster children. Assistance is paid on the basis of a needs-test with maximum benefits for disabled persons amounting, as of the end of the fiscal year, to $75 per month. Benefits for needy families calculated at seventy per cent of assessed budgetary requirements are paid up to a maximum of $150 per month.

Municipal assistance is provided under Part II of the Act to persons not covered by the provincial assistance program or to supplement provincial assistance. Under this Part, the province sets budget standards and also provides for financial incentives to municipalities for the payment of assistance on the basis of need. Provincial contributions amount to seventy-five per cent or more of costs, depending on the fiscal capability of the municipality. Assistance is administered through municipal welfare departments and, in several areas, by the provincial Department of Public Welfare or a local children's aid society on behalf of the municipality.

Health Care

Medical services are provided through an agreement between the province and the Nova Scotia Medical Society to recipients of provincial assistance and long-term recipients of municipal assistance. Benefits include medical, surgical and obstetrical care and eye examinations. Additional assistance can be provided by the province or through municipalities to cover the costs of optical and dental care and drugs.

Institutional Care

Needy persons requiring institutional care are assisted by municipalities under Part II of the Social Assistance Act. Care is provided in fifteen municipal homes for the aged, six

municipal homes for the disabled (which care mainly for retarded adults), and in a number of proprietary homes for the aged and nursing homes licensed by the Department of Public Welfare under the Boarding Homes Act or by the Department of Health under the Nursing Homes Act.

During the year, 110 homes providing nursing or domiciliary care for adults and having a total of about 2,500 beds were listed as homes for special care under the federal cost-sharing Agreement. Rates paid for care in each home are determined according to the types and levels of care provided and are approved by the Department of Public Welfare. The upper range of rates paid in homes for the aged was about $8.00. Residents of homes may retain a comforts allowance of $15.00 per month.

Child Care

Federal contributions are being made toward the costs of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Act. Supervision of such children is the responsibility of the provincial Department of Public Welfare, eleven children's aid societies and a family and children's service. Payments for maintenance were based upon monthly rates set by a committee established under the Child Welfare Act.

Provincially owned and operated child care institutions include the Nova Scotia Training School for Retarded Children at Truro and three homes for retarded children. These have a bed capacity of 340. Some ten child caring institutions operated by voluntary or religious organizations with a bed capacity of 290 are also listed under the Plan.

Welfare Services

Federal contributions toward new costs of welfare services are being made for three kinds of agencies in Nova Scotia, namely:

- the provincial Department of Public Welfare, including the headquarters administration and the thirteen regional and district offices;

- eighteen organized municipal departments of welfare that are responsible for the administration of assistance and the provision of related welfare services; and

- eleven children's aid societies and a family and children's service in which the province pays the cost of supervising children in care and contributes, together with the municipalities, to the costs of protection services, services to unmarried mothers, and adoption services.

Significant Developments during 1967-68
relating to the Canada Assistance Plan

Steps were taken to standardize procedures in the province's municipal welfare offices.

The maximum benefit available to disabled persons under the Social Assistance Act was increased from $55 to $75 per month and provincial supplementary assistance of up to $25 per month was instituted for recipients of old age assistance and blind and disabled persons allowances. Provision was also made for the inclusion in the budget of an item for special needs up to a maximum of $40 per month.

The level of provincial contributions for the cost of protective services for children was increased from one-third to one-half of costs incurred by Children's Aid Societies.

A new Adoption Act updated procedures and gives the Director of Child Welfare more authority for the supervision of adoptions.

A Day Nurseries Act was passed which provides for the inspection and licensing of day nurseries.

NEW BRUNSWICK

General Assistance

General assistance is provided under the Social Welfare Act which came into effect on January 1, 1967. Under this program, assistance can be provided to any person in need, including persons formerly granted provincial or municipal assistance. Benefits are determined on the basis of budgetary allowances set by regulation for items of basic need which include set amounts for food, clothing, household and personal items, and maximum amounts for shelter, fuel and utilities. Provision is also made for items of special need. The program is administered by the province through a network of fifteen district offices and two sub-offices.

Health Care Services

Health care services are provided under the Social Welfare Act to recipients of assistance and include physicians' services, surgery, obstetrics and specialists' services. A medical card is issued to recipients, and services are made available through an agreement between the province and the New Brunswick Medical Society. Additional provision is made for other health needs, including diagnostic services, prescribe drugs, dental care and vision services.

Institutional Care

Needy persons requiring institutional care are assisted under the Social Welfare Act to meet the costs of care in homes for the aged, nursing homes and other types of residential welfare institutions. These homes are licensed under the Auxiliary Homes Act and the Health Act. Rates are established in each home in accordance with the level of care provided and are approved by the provincial Director of Welfare. Residents of these homes retain $15 per month as a comforts allowance.

During the year, 90 institutions providing domiciliary or nursing care for adults and having a total of about 4,000 beds were listed as homes for special care under the federal cost-sharing agreement.

Child Care

Federal contributions are being made toward the cost of maintaining children that are placed in foster homes and child care institutions under the authority of the Child Welfare Act. Since January 1, 1967, the province has been responsible for the maintenance of all children in care. Payment is based upon daily board rates which vary from $1.35 to $1.60 per day, depending on the age of the child, with additional amounts being paid for clothing, health services, education and other requirements. Child care institutions include the New Brunswick Protestant Orphans' Home, Saint John, with 170 beds and two other institutions with a total of 40 beds.

Welfare Services

New costs for which contributions to welfare services are made under the Canada Assistance Plan are related to the administration of the provincial Department of Health and Welfare. They include costs of administering assistance under the Social Welfare Act and of providing related welfare services and extending child care and protection services. Services are provided directly by the province through its district offices.

Significant Developments during 1967-68 relating to the Canada Assistance Plan

During the year the province concentrated on the implementation of its new Social Welfare Act which came into effect on January 1, 1967.

Arrangements were made with the New Brunswick Dental Society to provide dental services for persons being assisted under the Social Welfare Act and the Child Welfare Act.

QUEBEC[1]

General Assistance

General assistance is provided under the Public Charities Act and Regulations. This program includes assistance to the unemployed, assistance to widows and spinsters aged 60-65 years, supplementation to old age security pensioners, and supplementation to recipients of categorical allowances. Assistance to needy mothers is shared under the federal Unemployment Assistance Act, and administered under the Quebec Needy Mothers Allowances Act.

Assistance is determined in accordance with an extensive list of basic needs, with variable rates for food, clothing and fuel, and fixed rates for personal and household needs. Actual costs are paid for shelter and utilities. Assistance levels are based upon factors such as size of family and locality, thereby taking into account higher costs in larger centres such as Montreal and Quebec City.

The assistance program is administered by the Social Assistance Directorate through regional offices of the Department of Family and Social Welfare, and by municipal and social welfare agencies.

Health Care Services

Medical care is provided to recipients of most classes of assistance. The program is authorized by the Medical Assistance Act and operates under an agreement between the province and medical associations. Assistance recipients are issued with medical assistance cards which entitle the holder and dependents to physicians' services, including medical and surgical services and certain diagnostic services. Drugs and other required services are provided as items of assistance under the Public Charities Act.

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(1) Federal financial support of the programs covered under the Canada Assistance Plan Agreement with Quebec is provided under the terms of the Established Programs (Interim Arrangements) Act.

Institutional Care

Needy persons requiring institutional care are maintained in homes for the aged, nursing homes and other types of residential care institutions which are operated by religious and charitable organizations or are under private ownership. Licensing and supervision is carried out by the Department of Family and Social Welfare and in a small residual program by the Department of Health. Maximum rates for maintenance are set by order-in-council in accordance with the levels of care provided by the home and required by the resident. The maximum rate for bed care cases is $6.75 per day.

During the year, 470 institutions providing domiciliary or nursing care to adults and having a total of about 18,000 beds were listed as homes for special care under the federal cost-sharing agreement. Residents of these homes retain $22 per month as a comforts allowance.

Child Care

Federal contributions are made toward the costs of care and maintenance of children in child welfare institutions or in the care of social agencies under the terms of the Public Charities Act. Full financial responsibility for the municipal share of child welfare costs has been borne by the province since April 1, 1966. Child care may be provided in a variety of children's institutions, foster homes, or private day nurseries. The full range of services spans the field from general supervision and care of normal children to the training of retarded children and includes intensive treatment and protection for children with psychological problems.

During the year, 118 child care institutions with about 13,650 beds were listed as homes for special care. Seventy of these are classified as public assistance institutions, that is, operated under voluntary auspices and have a total of about 11,500 beds.

Welfare Services

Federal contributions are being made for new costs of welfare services provided primarily under the Public Charities

Act, the Social Allowances Commission Act and the Adoptions Act by the Department of Family and Social Welfare, by social welfare agencies, and by municipal departments of welfare.

Significant Developments during 1967-68
relating to the Canada Assistance Plan

Payments under the Public Charities Act on behalf of children in care were increased and range from $1.95 to $2.74 per day. For maladjusted children the rate is $ 5.00 per day.

Maximum rates for certain types of institutional care for adults were altered from per diem rates to an actual cost basis

The comforts allowance for residents of homes for speci care was increased from $15.00 to $22.00 per month. This allowance was also made available to needy persons in hospital and sanatoria.

ONTARIO

General Assistance

During the year there were two programs of a general assistance nature in effect in Ontario.

Persons and families in need who require maintenance o a long-term basis, may be granted an allowance under the Family Benefits Act. The Act provides for aid to persons 65 years of age or older who are not in receipt of an allowance under the Old Age Security Act; disabled or blind persons 18 years of age or over; mothers with dependent children if the father is absent or unemployed; women 60 to 65 years of age who are single, widowed, or whose husbands are absent; fathers with dependent children and foster mothers raising children other than their own.

Benefits are determined on the basis of pre-added budge intended to cover food, clothing, household maintenance and sundries according to family size and composition, with addit provisions for fuel and shelter. Free medical and hospital insurance are provided. This program is administered by the province through its 19 regional offices.

Persons not able to qualify under the provincial program are assisted under the municipally administered general welfare assistance program. Municipal assistance is also provided on the basis of need, using pre-added budgets and maximum shelter and fuel allowances set by the province. Under this program, provision is also made for granting additional assistance to recipients of old age security, categorical allowances, Family Benefits and rehabilitation allowances. In addition, the program provides that special assistance may be provided to or on behalf of persons in need. Such aid includes drugs, prosthetic appliances, funeral and burial costs. Municipalities are reimbursed by the province for eighty per cent of the cost of providing assistance for basic requirements and additional aid and fifty per cent of the cost of items of special assistance.

Health Care Services

Physician's services, including medical, surgical and obstetrical services, are provided to recipients of provincially administered benefits and municipal general welfare assistance through the Ontario Medical Services Insurance Program. Dental services may be provided by the province or a municipality under the Family Benefits Act or the General Welfare Assistance Act. Other health care services are provided on a supplementary basis by municipalities under the authority of the General Welfare Assistance Act.

Institutional Care

Institutional care for needy persons is provided through a number of programs in the province:

- elderly persons are cared for in over sixty homes operated by cities, counties, and districts under the Homes for the Aged and Rest Homes Act. The province reimburses municipalities for seventy per cent of net costs of providing care for needy persons in such homes;

- aged, infirm and other persons are also cared for in over eighty institutions operated by voluntary and religious organizations under the Charitable Institutions

Act. The province, during the year under review, reimbursed such homes for eighty per cent of their net costs, not exceeding the average daily costs of care and maintenance, established at $8. per day;

- assistance to cover the costs of care in proprietary boarding homes and nursing homes is provided by municipalities through the General Welfare Assistance program, with provincial contributions amounting to eighty per cent of costs up to $8.50 per day for nursin care in a licensed nursing home.

During the year, over 600 institutions of the types descr with a total of about 26,000 domiciliary and nursing beds, wer listed as Homes for Special Care under the federal cost-sharir agreement. Residents in such homes retain $15.00 per mont as a comforts allowance.

One hundred and fifty residential homes for special care with a total capacity of approximately 1,200 beds assisted the authorized nursing homes in caring for discharged patients of mental hospitals and have been added to the program for cost-sharing purposes. Residents in homes of this type exceed 3,0

Child Care

Federal contributions are made toward the costs of maintaining children placed in foster homes and in child care institutions under the authority of the Child Welfare Act, including the costs of caring for children placed by more than fifty children's aid societies in the province. Under this Act, the province and municipalities reimburse the children's aid societies for the costs of maintaining children on the basis of sixty per cent provincial and forty per cent municipal. Cost for the care and maintenance of children of unmarried parents are borne one hundred per cent by the province.

During the year, about 200 child-caring institutions with a capacity of some 2,300 beds were listed as homes for speci care under the federal cost-sharing agreement. These includ receiving and group homes operated by children's aid societie and institutions for the emotionally disturbed.

Welfare Services

Federal contributions are made toward new costs of welfare services provided by three kinds of agencies in the province, namely, the administration of assistance and the provision of welfare services through the provincial Department of Social and Family Services; the cost of administering the General Welfare Assistance and other programs through about seventy municipal welfare departments; and the cost of providing child welfare services, including supervision of children in care, adoption services, protection services and services to unmarried mothers, through children's aid societies in the province.

Significant Developments During 1967-68 Relating to the Canada Assistance Plan

The province enacted legislation for the Family Benefits program which came into effect on April 1, 1967. Under this program, allowances are provided to needy families, including those in which the husbands are unemployed, widows and single women over the age of sixty years, and persons formerly granted old age assistance and blind and disabled persons allowances.

An amendment to the General Welfare Assistance Act, and the amended Regulations provide for the payment of assistance on a needs-test basis with increased rates in line with those under the Family Benefits Act.

New Regulations governing children's institutions were passed establishing new standards and providing for provincial sharing in eighty per cent of the institutions' deficits.

New Regulations under the Homes for the Aged and Rest Homes Act dealt with standards and procedures to be followed in the operation of homes.

The level of provincial contributions toward the maintenance of needy persons in charitable institutions was increased from seventy-five per cent, to eighty per cent of costs effective in April 1967. The maximum rate for care was increased to $8. per day and the comforts allowance for residents was set at $15. per month.

New Regulations were adopted under the Day Nurseries Act. These are concerned with the determination of eligibility for day nursery services and of the provincial grant for operatin costs.

New Regulations under the Medical Services Insurance Act included coverage to recipients of assistance or benefits under the Family Benefits Act, 1966, or under any of the predecessor acts.

MANITOBA

General Assistance

General assistance is provided through two programs, namely, provincial social allowances and municipal assistance.

Social allowances are provided to mothers in need, the physically and mentally disabled, persons 65 years of age or over, unemployed and unemployable residents of unorganized territories and on behalf of neglected children. Benefits are determined on the basis of budgetary amounts for food, clothing, fuel, utilities, household and personal needs, and shelter. The social allowance program is administered directly by the province through a network of eleven regional offices.

Assistance is provided by municipalities on a short-term basis to persons not covered by the provincial social allowance program. This assistance is also provided on a needs-test basis using budget scales set by each municipality. The province reimburses municipalities for expenditures for assistance under a formula set out in the Social Allowanc Act.

Health Care Services

Recipients of provincial social allowances are provided with medical, dental, and optical care and prescribed drugs under the Social Allowance Medicare Plan. Health care provisions for recipients of municipal assistance are made by the individual municipalities.

Additional health services may be provided as required to recipients of provincial assistance. Such services include home nursing and homemaker services, prosthetic appliances, physiotherapy, special rent or food allowances, and transportation to obtain health care.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in paying for their care through the social allowances program. In most instances, the care is provided in voluntary and proprietary homes located throughout the province.

The institutional care program is administered by Care Services, a joint office of the Departments of Health and Welfare which is responsible for the development, licensing and inspection of homes and for the placement of individuals requiring special care.

During the year over eighty domiciliary and nursing homes for adults containing about 4,500 beds were listed as homes for special care under the federal cost-sharing agreement. Payments are based upon rates that are set for each of the homes in accordance with the level of care provided.

With provincial approval, an institution may establish a comforts allowance. The usual amount of the allowance is $12 per month.

Child Care

Federal contributions are made toward the cost of caring for children that are placed in foster homes, group homes, and child care institutions under the authority of the Child Welfare Act. Payments during the year included costs for children placed in care by the province, by the four children's aid societies in the province, and by the Jewish Child and Family Service. Payments are based upon rates determined by an advisory committee established under the Child Welfare Act.

During the year some 26 child caring institutions with a capacity of 345 beds were listed under the federal cost-sharing agreement. Most of these were group foster homes operated by children's aid societies.

Welfare Services

Federal contributions are made toward the cost of new welfare services provided by the provincial Department of Welfare which administers social allowances and provides other welfare services through a network of regional offices, by municipal departments of welfare which are responsible for the administration of assistance and the provision of associated welfare services, and by four children's aid societies providing child care, protection and adoption services.

Significant Developments during 1967-68 relating to the Canada Assistance Plan

The province amended its social allowances legislation to extend the use of welfare services and to facilitate the establishment and operation of work activity projects.

During the year food and clothing rates under the social allowances program were increased.

Per diem maintenance rates for children were revised upwards.

SASKATCHEWAN

General Assistance

General assistance is provided under the Saskatchewan Assistance Plan through which assistance may be granted to any person in need.

Benefits for long-term recipients are determined on the basis of budgetary allowances for basic maintenance, which include food, clothing, shelter, fuel, utilities and household and personal needs. Benefits for short-term assistance are based upon a pre-added budget covering all items except shelter for which actual expenditures are met. Provision is also made for granting assistance to cover a variety of items of special need, including household equipment, housekeeping allowances and items incidental to education or employment.

The Saskatchewan Assistance Plan is administered by the ovincial Department of Welfare through its regional offices, cept in the municipalities of Prince Albert and Moose Jaw here assistance is granted through municipal social departents.

ealth Care Services

Health care services are provided to persons who qualify r assistance under the Saskatchewan Assistance Plan. The nefits include physicians' services, diagnostic services, boratory procedures and dental surgery, all of which are ovided through the universal medical care program administered the Medical Care Insurance Commission. Additional benefits, ch as optical and dental services (including eye glasses and ntures), physiotherapy, chiropody, drugs and appliances are ovided when required through the Medical Services Division the Department of Health.

stitutional Care

Persons in need who require care in homes for the aged, rsing homes, homes for unmarried mothers and other types residential welfare institutions for adults are assisted in eeting the costs of such care through the Saskatchewan ssistance Plan. These homes are licensed and inspected by e Department of Welfare under the Housing and Special Care mes Act. A large proportion of such homes have been nstructed in recent years with the assistance of long-term, w-interest loans under the National Housing Act and are erated by voluntary groups or municipal corporations.

During the year, there were 98 such institutions containing total of 5,000 nursing and domiciliary beds which were listed homes for special care under the federal cost-sharing agreeent. Maximum rates payable were $180 per month for pervisory and limited personal care and $260 per month nursing care. In cases of hardship the Director of Public sistance may waive the maximum on rates. Residents of se institutions retain a comforts allowance of $10.00 per nth.

Child Care

The child care program is administered directly by the provincial Department of Welfare through its regional offices. Payments are made for maintenance, health care and other needs of children who have been placed in foster homes, group homes or child care institutions under the authority of the Child Welfare Act. Such care is provided to children who are found by the courts to be neglected and to children voluntarily committed to the Crown by their parents.

During the year nine child caring institutions with a capacity of 143 beds were listed as homes for special care under the federal cost-sharing agreement.

Welfare Services

Federal contributions are made toward the new costs of welfare services provided by the provincial Department of Welfare and the Social Service Departments of the cities of Moose Jaw and Prince Albert. Contributions in the provincial department go toward the costs of administering the Saskatchewan Assistance Plan and of providing associated welfare servic through fourteen regional offices and sub-offices and the cost of providing child welfare services, including supervision of children in care, protection services and adoptions.

Significant Developments during 1967-68 relating to the Canada Assistance Plan

Basic rates of assistance under the Saskatchewan Assista Plan were increased during the year. The Plan was also amend to emphasize its rehabilitative aspects and to facilitate the use welfare services.

The Child Welfare Act was amended to permit dealing wit certain potential juvenile offenders under child welfare legislat

New Regulations under the Child Welfare Act provide for the licensing and inspection of group homes.

LBERTA

eneral Assistance

General assistance is provided through the provincial ocial allowance and social assistance programs and through le municipal assistance program.

Social allowances are granted to persons in need because f age, physical or mental incapacity; to parents with dependent hildren; to persons taking rehabilitation courses, and on behalf f children in the home of a guardian.

Benefits are based upon rate schedules for food and lothing which are adjusted annually to reflect changes in the ost of living. Allowances for shelter are paid up to levels ccepted as the standard for health and decency in the community which the recipient lives. The social allowance program is dministered directly by the provincial Department of Public elfare through a network of thirty regional offices.

The provincial department also administers a social ssistance program for those persons requiring short-term aid, enerally unemployed employables who are not residents of a unicipality. Benefits are determined on a basis similar to that r social allowances.

Municipal assistance is provided on a short-term basis persons, usually unemployed employables, resident in the ommunity who do not qualify under the provincial social llowance program. Eligibility is determined through an ssessment of need using budgetary standards which are set the discretion of municipalities. The province reimburses unicipalities for eighty per cent of their expenditures for ssistance.

ealth Care Services

During the year under review, payroll recipients were ansferred to the Alberta Health Plan which entitles them to edical and hospital coverage. Other health services such as ental, chiropractic and optical care are provided through a reatment Services Card and prescription drugs are authorized

through a stub attached to the monthly cheque. Health care services for voucher recipients are provided on an individual basis.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in meeting the cost of such care through the social allowances program. Care may be provided in provincial, municipal or voluntary homes which are licensed and supervis under the Welfare Homes Act by the Homes and Institutions Branch of the Department of Public Welfare or in proprietary nursing homes licensed and supervised by the Department of Health under the Nursing Homes Act. A network of senior citizens lodges, built by the province and operated by the municipalities, provides domiciliary care.

During the year over 130 homes with 7,950 domiciliary and nursing beds for adults were listed as homes for special care under the federal cost-sharing agreement. There were over forty contract nursing homes in which the rate is $8 per day and sixty senior citizens lodges in which rates range from $70 to $85 per month. Residents of these homes retain a comforts allowance of $15 per month.

Child Care

Child welfare services in Alberta are administered mai by the province under the Child Welfare Act, with the full cost of maintenance being assumed by the province. Maintenance costs may include care in a foster home, at per diem rates wh varied during the year from $2.00 to $3.00 per day depending the age of the child. Costs for clothing, health care and schoo supplies are also met by the province.

During the year, some 30 child caring institutions with a capacity of about 1,000 beds were listed as homes for speci care under the federal cost-sharing agreement.

elfare Services

Three types of welfare services were included during
e year as shareable costs under the Canada Assistance Plan
greement, namely:

- direct services provided through the regional offices of the provincial Department of Public Welfare, including the administration of the social allowance and social assistance programs and the provision of child care and family services;

- the administration of assistance through municipal departments of welfare in ten major municipalities;

- the provision of welfare services by voluntary agencies primarily under the Preventive Social Services program.

gnificant Developments during 1967-68
elating to the Canada Assistance Plan

The province continued its practice of adjusting social
llowance rates to reflect increases in the cost of living.

Child welfare maintenance and clothing rates were
creased during the year.

The Welfare Statutes Amendment Act, 1964, was proclaimed
n January 1, 1968. Under its provisions no further applications
r old age assistance and blind and disabled persons allowances
ay be accepted by the province.

RITISH COLUMBIA

eneral Assistance

Two general assistance programs are operated in the
ovince: social allowances, and supplementary social allow-
nces.

Social allowances are paid to any needy person requiring
sistance on a short or long-term basis, except persons

eligible for old age assistance or blind or disabled persons allowances which the province continued to grant during the year. Budgets are determined on the basis of rate scales set by the province covering food, clothing, household operation and sundry expenses, and shelter costs. The program is administered through regional and district offices of the Department of Social Welfare, except in thirteen major municipalities where administration is undertaken through municipal departments of welfare.

Supplementary social allowances may be granted to recipients of old age security, old age assistance, and blind and disabled persons allowances and are paid on the basis of need up to established income ceilings. Such ceilings at the end of the fiscal year are $137.10 for a single old age security recipient and $244.20 for a couple. For recipients of categori allowances they are $111 for a single person and $210 for a couple. The program is administered by the provincial Old Ag Assistance Board, with applications being accepted through the district offices of the Department of Social Welfare or municip welfare offices.

Health Care Services

Health care coverage is provided by the issuance of a medical card to long-term recipients of social allowances and persons receiving supplementary social allowances. Physicia services, including medical, surgical and obstetrical care, ar made available through an agreement between the province and the British Columbia Medical Association. Other services provided include eye examinations and prescribed drugs to the extent covered in a drug benefit list. Basic dental care is provided under an agreement with the provincial Dental Assoc tion in cases where it is specifically authorized by the departm

Institutional Care

Needy persons who require care in homes for special ca are assisted in meeting the costs of this care through the soci allowances program. Care may be provided in homes for the aged and other types of "boarding homes" licensed under the Private Hospitals Act. During the year, 390 boarding homes with 5,850 beds and seventy-two nursing homes with 3,450 be

were listed as homes for special care for federal cost-sharing purposes. Maximum assistance rates paid were $120 per month for boarding home care and $245 per month for nursing home care. Residents may retain $16 per month as a comforts allowance.

Child Care

Federal contributions are made toward the cost of care provided to children who have been placed in foster homes, group homes and child care institutions under the authority of the Protection of Children Act. The costs shared included maintenance payments to foster parents which varied from $50 to $75 per month depending on the age of the child, and clothing allowances, health care services and school supplies. The child care program is administered by Children's Aid Societies in Victoria and Vancouver and through the district offices of the Department of Social Welfare in other parts of the province.

During the year, some 65 child caring institutions with a capacity of 530 beds were listed as homes for special care for federal cost-sharing purposes.

Welfare Services

Federal contributions are made toward new costs of welfare services provided through the provincial Department of Social Welfare, including costs of administering social allowances and supplementary social allowances and providing related child and family welfare services through a regional office structure which includes forty-four district offices. They are also made for the costs of administering assistance and providing services through fourteen municipal welfare departments and of providing adoption, protection and other child welfare services through the three Children's Aid Societies located in Victoria and Vancouver.

Significant Developments during 1967-68
relating to the Canada Assistance Plan

Income ceilings under the supplementary social allowance program were increased from $135 to $137.10 for single old age security recipients and from $240 to $244.20 per month for couples. For recipients of categorical allowances, the ceiling remained at $111 per month for single persons and $210 for married couples.

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TMENT OF NATIONAL HEALTH AND WELFARE

NADA ASSISTANCE PLAN 68-69 ANNUAL REPORT

ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1969

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Ottawa, 1970

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His Excellency the Right Honourable Roland Michener, P.C., Q.C.,
Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to your Excellency the Annual Report on the administration of the Canada Assistance Plan for the fiscal year ended March 31, 1969.

Respectfully submitted,

John Munro
Minister of National Health and Welfare

The Honourable John Munro, P.C., M.P.,
Minister of National Health and Welfare,
Ottawa.

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1969.

Respectfully submitted,

Joseph W. Willard,
Deputy Minister of National Welfare

ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1969

The Canada Assistance Plan was enacted by Parliament and came into operation during 1966-67. It received Royal Assent on July 15, 1966, with retroactive effect to April 1st of that year.

The Plan is a measure for supporting the integration, broadening and improvement of provincial and municipal public assistance programs and encouraging the extension and development of welfare services. Under it, contributions amounting to fifty per cent of shareable costs are made toward provincial and municipal expenditures for public assistance and welfare services.

Following enactment of the Plan, Regulations under Part I, General Assistance and Welfare Services, were developed in close collaboration with the provinces and were adopted by the Governor-in-Council on February 8, 1967. All provinces had signed Agreements under the Plan by August, 1967.

Agreements under Part III of the Plan, which relates to work activity projects, were developed during 1967-68 and Regulations formulated to permit federal sharing in the cost of such projects. Seven provinces signed Agreements under Part III in 1968.

During the year members of the staff of the Division provided consultative services to the provinces and met with provincial officials to clarify procedures and deal with problems resulting from the implementation and administration of the Canada Assistance Plan.

Work continued on the development of Agreements under Part II of the Canada Assistance Plan which covers Indian Welfare. However, no Agreements had been signed under this Part at the end of the year.

OBJECTIVES AND MAIN FEATURES OF THE PLAN

The Canada Assistance Plan has two primary objectives. These are to support the provision of adequate assistance to persons in need and to encourage the development and extension of welfare services designed to help prevent and remove the causes of poverty and dependence on public assistance.

The Plan, and the Regulations and Agreements under it, are the result of close and continuing federal-provincial collaboration at the ministerial and official levels. This collaboration is being continued in the administration of the Plan.

The following are the main features of the Canada Assistance Plan:

Comprehensive Approach

Support is provided for the development of integrated, comprehensive general assistance programs enabling provinces to meet the varying requirements of different groups within one program and administrative framework. Where there were formerly four federal-provincial assistance programs - for the aged, the blind, the disabled, and the unemployed - the Canada Assistance Plan makes it possible for the provinces, at their option, to combine these into a single program.

Assistance on the Basis of Need

The Plan provides for granting of assistance on the basis of an assessment of a person's budgetary requirements as well as his income and resources, rather than, as in the "categorical" programs, on the basis of income and resources only. No upper limit is placed on the benefits for which federal contributions are available.

Definition of Assistance

The comprehensive definition of assistance in the federal statute carries a strong rehabilitative emphasis. It covers not only a broad range of material needs, but also health care services, a variety of special needs and specified welfare services.

Supplementation of Income

An important feature of the Plan is the provision of federal contributions toward the costs of supplementary payments over and above benefits paid under income maintenance programs such as old age security (which includes the guaranteed income supplement), the Canada Pension Plan, the Quebec Pension Plan, Unemployment Insurance, other income and earnings from employment.

Health Services

The federal government shares in the cost of health care services for persons in need. Included are medical and surgical services, nursing, dental and optical care, drugs, prosthetic appliances, and other health services. To the extent that medical services are covered under the national Medicare program in any province, the sharing provisions of the Plan are not applicable.

Mothers Allowances and Child Care

Federal sharing is extended to programs providing aid to needy mothers and their dependent children. With the exception of one province, this form of aid has been incorporated into general assistance programs administered by the provinces. Federal sharing is extended also to costs of maintaining children in the care of child welfare authorities.

Institutional Care

The Plan provides for federal sharing in the cost to the provinces and municipalities of maintaining needy persons in a wide range of residential welfare institutions, known collectively as homes for special care. These include homes for the aged, nursing homes, homes for unmarried mothers, hostels for transients and child care institutions.

Administration and Welfare Services

Contributions may be made toward the cost of strengthening and extending the administration of public assistance

programs and associated welfare services. The services that may be supported include rehabilitation, casework, counselling, assessment, adoption, homemaker and day-care services, and community development.

Indian Welfare

Federal-provincial Agreements are authorized under Part II of the Plan to provide for the extension, with the consent of Indian bands, of provincial welfare programs to Indians living on reserves or in unorganized territory in the provinces. The Plan provides for federal sharing on the basis of a special financial formula that takes into account the higher expenditures incurred by the provinces in assuming this responsibility.

Work Activity Projects

Provision is made under Part III of the Plan for special work activity programs to help improve the motivation and work capacity of persons who have not been able to take full advantage of training opportunities, or who have unusual difficulty in securing or retaining employment.

BACKGROUND AND DEVELOPMENT OF THE PLAN

Previous Public Assistance Legislation

The Canada Assistance Plan has its roots in the public assistance programs which are being consolidated under it, particularly the four federal-provincial programs of old age assistance, blind persons allowances, disabled persons allowances and unemployment assistance. These shared-cost programs, the result of forty years of development, were preceded by a variety of measures to aid the poor. Some of these date back to the early history of the provinces, but with the advance of industrialization at the end of the nineteenth and the beginning of the twentieth century, public assistance programs began to assume major dimensions. It was then that it became necessary for the provincial and federal governments to accept responsibilities previously carried by voluntary agencies and institutions or by municipalities.

Initially the senior governments left responsibility for general assistance with the municipalities and gave special attention to readily definable groups regarded as having strong claims to aid on a more assured basis. An early example of such groups was widows with dependent children for whom provincial mothers allowances programs were introduced during and after the First World War.

The enactment of the Old Age Pensions Act in 1927 marked the beginning of federal-provincial co-operation in the provision of assistance to a special group. Under the Act the federal government undertook to pay half the cost of pensions of up to $20 per month granted by a province to persons 70 years of age and over who met the residence requirements and means test set out in the federal Act.

The most significant amendment to the Old Age Pensions Act was the extension of coverage in 1937 to blind persons forty years of age and over. In 1951 the Act was replaced by two federal-provincial programs - the Old Age Assistance Act covering persons between the ages of 65 and 70, and the Blind Persons Act covering blind persons over the age of 21 (reduced in 1955 to age 18). In the same year the federal Old Age Security Act was passed providing a universal flat rate pension for persons 70 years of age and over.

A third federal-provincial program designed for the permanently and totally disabled was adopted in 1954 with the enactment of the Disabled Persons Act. It also employed a means test under which the applicant's income and property were taken into consideration in determining eligibility for a pension and, like old age assistance, it provided for a federal contribution of 50 per cent of assistance granted. The Blind Persons Act differed in that it provided for a federal contribution of 75 per cent and allowed higher income ceilings in determining eligibility.

Historically, the federal government made grants to provinces and municipalities for general assistance in two periods of economic depression. The first occurred just after the First World War and the second during the 1930's. During the latter grants were made on a large scale to meet assistance costs resulting from massive unemployment.

To avoid a similar situation after the Second World War, the federal government established a national contributory unemployment insurance program in 1940, with contributions beginning July 1, 1941. In 1945, as part of a comprehensive post-war plan of reconstruction, the federal government also proposed the establishment of an unemployment assistance program which it would finance and administer in conjunction with unemployment insurance. However, the federal and provincial governments failed to reach agreement on the 1945 proposals and no action was taken on unemployment assistance until 1956.

In that year, the Parliament of Canada enacted the Unemployment Assistance Act which, contrary to the approach proposed in 1945, provided for a shared-cost program under which assistance would continue to be administered by the provinces and their municipalities. The Act initially contained a population threshold feature under which federal contributions began only when the number of persons receiving assistance exceeded a stated percentage of the population; this was designed to limit federal sharing to the costs of assisting the employable unemployed. In 1957, the threshold was removed and the measure moved in the direction of becoming a general assistance program, although it retained a number of important exclusions which caused it to fall well short of being a comprehensive assistance measure.

The unemployment assistance program differed from the three categorical allowance programs in that it did not specify the conditions of eligibility under which assistance had to be granted, except for the requirement of being unemployed and in need, and it placed no ceiling on the rates of assistance to be shared. The provinces were thus free to develop their general assistance programs along lines best suited to their needs. With the stimulation of federal funds, the provinces made extensive improvements in the coverage and benefits provided under their general assistance programs in the period from 1956 to 1966, and the groundwork was laid for the adoption of a single assistance measure through which help could be provided on the basis of need to any person requiring it.

Development of the Plan

At the federal-provincial conference called in September 1963 to discuss the development of a new contributory wage-related social security measure, the Canada Pension Plan, it was recognized that there was also need for an improved public assistance program. This view was expressed in the closing communiqué of the conference which proposed that "the whole field of social assistance should be jointly re-examined in the hope of developing one general assistance program based on need." The question was further considered at the federal-provincial conference of Prime Ministers and Premiers in November 1963, which recommended the establishment of "a federal-provincial working group to review the operation of all joint welfare programs, in preparation for further discussion by Ministers."

As a result of that recommendation, a working party of federal and provincial Deputy Ministers of Welfare and other officials met in February 1964 to identify the issues that would have to be considered in developing an improved assistance program. In May 1964, the Ministers of Welfare, under the chairmanship of the Minister of National Health and Welfare, met in Ottawa to review the proposals of the working group. They recommended that the federal government and the provinces "should work toward an integrated, comprehensive general assistance program based on meeting need." The provincial Ministers also recorded their view that the federal government should "share fully in the costs of mothers allowances, health services and administration."

An additional factor that supported the development of more effective assistance and welfare service programs was the growing concern that was being expressed about problems of poverty. It was increasingly recognized that the talents of many Canadians were being wasted because of poverty, illness, inadequate education and training, and inequality in opportunities for work. In developing its legislative program in 1965, the government concentrated particularly on bringing forward a group of measures designed to combat these problems by improving the opportunities of people affected by them. The aim of the programs was to achieve the full utilization of the nation's human resources and the elimination of poverty.

One of the government measures referred to in the Speech from the Throne in April 1965 was the Canada Assistance Plan. It was described by the Prime Minister as a means of providing a framework for federal-provincial co-operation in helping those who need help the most. He noted that a number of the provinces had expressed their wish to develop a comprehensive general assistance measure under which the varying requirements of different groups could be met through one program. He emphasized that the objectives of the program would be to encourage the provision of adequate levels of assistance to persons in need and to support the development of social welfare services to assist such persons in achieving the greatest possible measure of self-support.

The government's proposals for the Canada Assistance Plan were thoroughly reviewed at a second meeting of Ministers of Welfare held in April 1965, and the basic features of the Plan were approved. The provincial Ministers welcomed the Plan "as providing a basis for a new and more flexible approach to public welfare in Canada." A number of technical problems were noted during the discussion, and it was agreed that meetings of federal and provincial officials should be continued. At a third meeting of Ministers of Welfare held in January 1966, additional suggestions relating to the coverage of the Plan were made, including proposals for its extension to children and youth in the care of child welfare authorities. The extensive federal-provincial collaboration in the development of the Plan ensured its relevance to varying conditions across Canada and its acceptability to the provinces which carry administrative responsibility for the programs supported by it.

A motion for the introduction of the Canada Assistance Plan Bill was placed before the House of Commons on April 4, 1966; the Bill passed first reading on June 21st and, after extensive debate, received third reading in the House of Commons on July 8th and in the Senate on July 12th. Notice of Royal Assent to the Bill was given in the Canada Gazette on July 23rd.

Development of Regulations and Agreements

Following the enactment of the legislation, extensive consultations were held with the provinces concerning the

Regulations and Agreements under the Plan. This included official discussions held in each of the provinces to obtain provincial views on the proposed Regulations and Agreements and their impact on provincial programs and plans. The Regulations, adopted by Order-in-Council on January 26, 1967, provided further definitions of terms as required by the legislation, outlined the kinds of costs for which contributions could be made, and indicated the basis for payment of claims under the program. These were carried forward into the Agreements which outline the undertakings by the provinces and Canada under the Plan. The dates on which Agreements under Part I were made with the provinces are indicated below. These Agreements were retroactive to April 1, 1966.

Newfoundland	March 30, 1967
Prince Edward Island	March 30, 1967
Nova Scotia	March 22, 1967
New Brunswick	April 5, 1967
Quebec*	August 21, 1967
Ontario	March 28, 1967
Manitoba	March 20, 1967
Saskatchewan	March 22, 1967
Alberta	March 30, 1967
British Columbia	March 23, 1967

APPLICATION OF THE PLAN

Assistance to Persons in Need

A primary objective of the Plan is to support the provision of adequate assistance to persons in need. Contributions are made under it toward the cost of assistance granted on the basis of a needs test, that is, a test under which the budgetary requirements, as well as the income and resources, of applicants and their dependents are taken into account. This is in contrast to the means test under which only income and assets computed as income are taken into account within set benefit and income ceilings.

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* The Agreement with Quebec involves Section 19 of the Canada Assistance Plan which provides that the terms of the Established Programs (Interim Arrangements) Act apply to the Plan, rather than to the four pre-existing shared-cost public assistance programs.

The major costs of assistance for which contributions are made under the Plan are for basic requirements which are defined in the legislation to include food, shelter, clothing, fuel, utilities, household supplies and personal requirements. When provinces enter agreements under the Plan, they agree to take these requirements into account in determining eligibility for assistance. Allowances for items such as food, clothing, household supplies and personal requirements are usually based on rate scales set by the provinces on the basis of budget studies. These allowances vary with family size and composition. For other budgetary items such as shelter, fuel, and utilities, actual costs to the recipient are generally used.

The rehabilitative emphasis in the Plan is evident in its provision for contributions toward the costs of welfare services purchased for persons in need and items of special need obtained for such persons. Welfare services, which may be purchased on a fee-for-service basis, include rehabilitation, casework, counselling, assessment, and homemaker and day-care services. The items of special need toward which contributions may be made include tools or equipment that are essential in enabling a recipient to obtain employment and items necessary for his safety, well-being or rehabilitation. These include household equipment and furnishings, repairs to property, special food or clothing and items required by disabled persons.

Expenditures for items of special need exceeding $500 in cost require the approval of the Director of the Canada Assistance Plan. Contributions were made during the year for such items as building supplies for repairs and additions to dwellings, installation of furnaces and plumbing, household furnishings, and prostheses.

The Plan is designed to support the provision of assistance to any person in need, whatever the cause of his need. The legislation does identify, however, the major groups to whom assistance will be provided. These are described as persons who are unable to provide adequately for themselves because of inability to obtain employment, loss of the principal family provider, illness, disability or age. Other persons such as those who are employed but who require supplementary help may also be assisted.

The programs through which assistance is granted are variously known in the different provinces as social assistance, social allowances, general assistance, family benefits and general welfare assistance. The patterns of administration for these programs vary from province to province. In Newfoundland and New Brunswick, the province has assumed total responsibility for the administration of assistance. This is also true in Saskatchewan with the exception of two municipalities. In the provinces of Nova Scotia, Manitoba, Alberta and Ontario, assistance is provided through a combination of provincial and municipal administration. A similar pattern is found in Prince Edward Island, British Columbia and Quebec. However, in Prince Edward Island two welfare bureaus in Charlottetown also administer assistance. In British Columbia supplementary social allowances are administered by the Old Age Assistance Board and, in Quebec, social welfare agencies administer assistance in some parts of the province. In provinces where both the province and its municipalities provide assistance, persons expected to be in need on a long-term basis are usually assisted through provincial programs, while those whose needs are of shorter duration are assisted by municipalities.

Maintenance of Children

The assistance provisions of the Plan also cover children under the age of twenty-one who are in the care or custody or under the control or supervision of child welfare authorities. This extends to children, most of whom are in foster homes, that have been placed in the care of such authorities by court order or by agreement with the parents. The assistance costs for which contributions may be made include foster home payments, frequently based on standard rates for various age groups, health care services and other needs of children. The programs covered include those administered by provincial child welfare authorities and through children's aid societies.

In the provinces of Newfoundland, Prince Edward Island, New Brunswick, Quebec and Saskatchewan the provincial departments of welfare are responsible for the administration of child welfare programs. This responsibility is borne by the provincial authorities together with children's aid societies in Ontario, British Columbia, Manitoba, and Nova Scotia. In

Alberta where child welfare services were formely a municipal responsibility, the province began to assume responsibility for all aspects of child welfare in 1966-67.

Institutional Care

The costs of providing care for persons in need who are in residential welfare institutions are also covered under the Plan. These institutions are referred to as homes for special care and include homes for the aged, nursing homes, hostels for transients, homes for unmarried mothers, child care institutions and other residential institutions that have the primary purpose of providing supervisory, personal or nursing care or social rehabilitation. The Plan does not cover care provided in hospitals, correctional institutions or institutions whose primary purpose is education. The homes for special care provisions of the Plan were carried forward from the Unemployment Assistance Act and extended to cover child care institutions such as receiving homes, orphanages and specialized welfare institutions for children with physical or mental disabilities.

At the end of the year, some 2,800 institutions with a capacity of more than 110,000 beds had been recognized as homes for special care. Of these institutions 2,300, with a capacity of about 93,000 beds provided institutional care to adults and 500 with a capacity of about 17,000 beds provided institutional care to children.

Health Services

Under the Plan the federal government may reimburse the provinces for half the cost of health care services provided to persons in need. The definition of health care services covers medical, surgical, obstetrical, dental and nursing services, including drugs, dressings, prosthetic appliances, and other items or services associated with the provision of specified services. The Plan excludes services provided under any federal-provincial shared cost health measure. At present this applies in respect to insured services within the meaning of the Hospital Insurance and Diagnostic Services Act or any other prescribed hospital care services, and services covered under the Medical Care Act in any participating province.

Welfare Services

As a means of supporting the development of preventive and rehabilitative programs, the Plan authorizes contributions toward provincial and municipal expenditures for welfare services. These are described, generally, as services that have as their object the lessening, removal or prevention of the causes and effects of poverty, child neglect or dependence upon public assistance. More particularly, they include rehabilitation services, casework, counselling and assessment services, homemaker and day-care services, and community development. Services related wholly or mainly to education, correction, recreation or the provision of health or hospital care are not covered. Administrative, secretarial and clerical functions associated with the provision of welfare services and the administration of assistance are covered, as are staff training, consultation, research and evaluation associated with welfare programs. The latter are included as a means of supporting improvements in the effectiveness of personnel and encouraging assessment of programs in relation to their objectives.

An important feature of the Plan is its emphasis on prevention of the social problems that lead to poverty, family breakdown and the need for public assistance. Thus, contributions can be made for costs of welfare services extended not only to persons in need, but also to persons who may become needy if they do not receive such services.

The Plan is intended to encourage the improvement of existing services and the development of new ones. In view of this, contributions are made toward provincial or municipal expenditures for welfare services that are beyond those incurred during a period referred to as the base year; in the case of provinces, this is the fiscal year 1964-65. The types of cost that are shared are salaries and fringe benefits, travel costs, including attendance at conferences and seminars, certain costs of staff training and development, and fees for consultation and research.

Contributions are made when services are provided through departments or agencies that have been recognized as

provincially approved agencies under the Plan. Most of the agencies in which costs are shared are provincial and municipal departments of welfare, the latter varying in size from departments employing only one or two officers to those in metropolitan areas employing several hundred persons. Contributions are also made, however, toward costs incurred by voluntary agencies to the extent that these are supported from provincial or municipal funds. These include children's aid societies, family bureaus and other agencies providing child care, family counselling, homemaker and day-care services. Some 250 voluntary agencies are recognized for cost-sharing purposes under the Plan.

Relationship to Categorical Programs

A basic aim of the Plan is to support the development of integrated programs through which assistance can be provided to any person in need. In line with this aim, Part V of the Plan enables the provinces, at their option, to cease accepting applications for old age assistance and for blind and disabled persons allowances and begin assisting the aged, the blind and the disabled through general assistance programs. Persons who have already qualified for allowances under these programs can be transferred to a general assistance program if they will qualify for comparable or greater benefits under that program.

Saskatchewan ceased to accept applications for categorical allowances on April 1, 1966 and transferred major portions of its existing caseloads to the Saskatchewan Assistance Plan. Ontario took a similar step with effect from April 1, 1967 and transferred a major portion of its caseload to the Family Benefits program. Alberta ceased accepting applications under the categorical programs on January 1, 1968. Newfoundlan ceased to accept applications for old age assistance and disabled persons allowances on December 31, 1967, and June 30, 1967, respectively, and, where possible, transferred recipients to general assistance. In Prince Edward Island, applications for old age assistance ceased to be accepted on April 1, 1967 and applications for disabled persons allowances on May 1, 1967. Part of the caseload under both programs was transferred to general assistance. Nova Scotia ceased accepting applications under the disabled persons program on December 1, 1968, and transferred recipients who could qualify for comparable benefits to their social assistance program.

Provisions of Agreements under the Plan

In entering Agreements under the Plan, provinces have undertaken to meet a number of criteria that are called for in the legislation. They have agreed to the use of a needs test in determining eligibility for assistance and to provide assistance to any person in need in an amount or manner that takes into account his basic requirements, that is, food, shelter, clothing, fuel, utilities, household supplies and personal requirements. The needs test, which is basically a budget-deficit approach to determining eligibility for, and the amount of assistance to be provided, takes into account the budgetary requirements of the applicant as well as the income and resources he has available to meet them.

The provinces have agreed not to require a period of residence within their boundaries as a condition of eligibility for assistance. They have also undertaken to provide in their law a procedure for appeals from decisions respecting applications for assistance or the granting of assistance, and to provide for an adequate method by which that procedure will be brought to the attention of applicants for assistance or recipients of assistance.

In recognition of the preventive and rehabilitative emphasis of the Plan, the provinces have undertaken to continue, as may be necessary and expedient, the development and extension of welfare services.

Description of Provincial and Municipal Programs

The Canada Assistance Plan sets broad conditions under which the costs of assistance and welfare services can be shared. Within this general framework, however, contributions can be made toward costs of programs that are developed and administered in the manner best suited to individual provincial circumstances and preferences. Brief descriptions of the programs for which costs are shared in each province are given in the Appendix, together with a resumé of significant developments that took place in the provinces during 1968-69. The Appendix describes the programs as they stood at the end of the fiscal year.

ADMINISTRATION OF THE PLAN

The program is administered by the Canada Assistance Plan Division in the Welfare Assistance and Services Branch. This Division is also responsible for administering the unemployment assistance program and the old age assistance and blind and disabled persons allowances programs. The Division consists of administrative and consultative staff at headquarters and field staff located in nine of the provinces.

Canada has undertaken, in Agreements with the provinces, to provide consultative services, where feasible, and as requested, in areas related to the development and operation of assistance and welfare services programs. At the end of the year consultative services were available in relation to Indian welfare, institutional care, accounting and auditing, public assistance standards, family and child welfare, community development, and staff training and development.

The field staff of the Division is responsible for carrying out administrative reviews in the field to determine the shareability of costs and for processing reimbursement claims. Field representatives are also responsible for maintaining liaison with provincial officials by advising them on interpretation of federal legislation and policies and assisting them in the preparation of claims. They also maintain contact with the Audit Services Branch which is responsible for an annual financial audit of the program.

During the year considerable emphasis was placed on the implementation of Part III of the Plan related to work activity. Projects were submitted by several provinces. Throughout the year staff members met with provincial officials to clarify procedures and deal with problems arising out of the administration of the Plan.

At a meeting in Ottawa in January 1969 the federal and provincial Ministers of Welfare agreed to collaborate in a variety of activities aimed at making their welfare programs more effective. As a result several federal-provincial working groups were set up. These included:

- A study group to develop a research program on alienation as it relates to social assistance recipients.

- A task force on a developmental approach to public assistance, to study the feasibility of developing a modified needs test and simplified procedures for determining eligibility with the aim of directing the major efforts of public assistance programs toward the rehabilitation of persons who have a potential for complete or partial self-support.

- A study of elements associated with an improved understanding of cost factors in social assistance, to include the identification of trends in costs, an analysis of caseloads and of factors contributing to increased costs, and the development of more adequate financial and statistical reporting.

In addition to the federal-provincial working groups involved in the studies mentioned above, it was agreed that there would be periodic meetings of federal and provincial officials concerned with areas such as social assistance, homes for special care, statistics, child welfare and staff development and training. These meetings will be under the general direction of the Deputy Ministers of Welfare.

A meeting of Deputy Ministers of Welfare was held in April 1968. Agenda items included consultative relationships between Canada and the provinces, problems of co-ordination and liaison, and a number of specific items such as legal aid, work activity, Indian welfare and appeals under public assistance programs.

Expenditures for Assistance and Welfare Services

During the year the federal government paid out $256.8 million to the provinces towards the costs of assistance granted. In addition Quebec received $149.3 million under the Established Programs (Interim Arrangements) Act. Payments by province for the years 1967-68 and 1968-69 are indicated in Table I below. The number of persons assisted, by province, is shown in Table II.

TABLE I

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN DURING FISCAL YEARS 1967-68 AND 1968-69

Province	1967-68	1968-69
Newfoundland	$ 17,901,873	$ 21,061,808
Prince Edward Island	1,738,858	2,549,257
Nova Scotia	10,263,995	11,022,716
New Brunswick	7,185,018	9,905,988
Quebec*	117,100,000	149,347,336
Ontario	100,287,774	118,303,660
Manitoba	15,571,938	13,981,779
Saskatchewan	13,403,926	14,129,601
Alberta	26,538,313	28,634,906
British Columbia	32,719,792	37,215,888
TOTAL	$342,711,487	$406,152,939

TABLE II

NUMBER OF PERSONS BEING ASSISTED UNDER THE CANADA ASSISTANCE PLAN AS AT MARCH 31, 1969

Province	Child Care	Other Recipients	Total
Newfoundland	1,915	84,545	86,460
Prince Edward Island	476	11,459	11,935
Nova Scotia	3,321	41,333	44,654
New Brunswick	3,092	45,155	48,247
Quebec	30,275	534,000	564,275
Ontario	18,300	265,827	284,127
Manitoba	3,014	42,788	45,802
Saskatchewan	5,843	51,608	57,451
Alberta	4,156	70,541	74,697
British Columbia	7,870	110,953	118,823
CANADA	78,172	1,258,209	1,336,471

* Payments to Quebec made under the Established Programs (Interim Arrangements) Act through the Department of Finance.

During the year contributions were also made under the four other shared-cost programs administered by the Division. Expenditures under these programs amounted to $3.4 million for old age assistance, $2.1 million for blind persons allowances, $6.4 million for disabled persons allowances, and $1.0 million for unemployment assistance. Amounts received by Quebec under the Established Programs (Interim Arrangements) Act on behalf of these four programs were $3.6 million for old age assistance, $1.5 million for blind persons allowances, $8.0 million for disabled persons allowances and $15.7 million for unemployment assistance. The decrease in payments will continue as larger portions of the groups covered come under the provisions of the Canada Assistance Plan, and as the age of eligibility under the Old Age Security Act is lowered to 65 years.

In 1967-68 expenditures amounted to $9.0 million for old age assistance, $2.3 million for blind persons allowances, $7.1 million for disabled persons allowances and $6.1 million for unemployment assistance. Amounts received by Quebec under the Established Programs (Interim Arrangements) Act on behalf of these four programs were $8.4 million for old age assistance, $1.6 million for blind persons allowances, $8.3 million for disabled persons allowances and $17.3 for unemployment assistance.

APPENDIX

PROVINCIAL PROGRAMS SUPPORTED DURING 1968-69 UNDER THE CANADA ASSISTANCE PLAN

As described in the body of this report, the federal government contributes toward the costs of assistance and health and welfare services provided by the provinces to persons who require them.

This appendix outlines the provincial programs through which this help was provided during the fiscal year 1968-69, together with a resumé of significant developments that took place in the provinces. The references are only to programs in effect during 1968-69, and consequently do not take into account any subsequent changes.

NEWFOUNDLAND

General Assistance

General Assistance is provided under the Social Assistance Act to unemployed persons and to persons requiring assistance on a long-term basis, including needy mothers and incapacitated persons. Benefits are determined on the basis of budgetary allowances set by regulation to cover food, clothing and personal care, fuel and rent or, in the case of a person living in his own home, household maintenance and utilities. Assistance may also be granted to cover needs such as repairs or renovations to homes, burials, and transportation of sick and destitute persons. The program is administered directly by the Department of Public Welfare through district offices.

Health Care Services

Health care services are provided to persons in need by the provincial Department of Health through a variety of programs. The costs of these programs are shared under the Canada Assistance Plan and include fees for medical and nursing services to indigents, costs of drugs and supplies, services provided through the Children's Health Service, and air ambulance services. Dental, optical and prosthetic services

may be provided under prescribed conditions, as may transportation to and from medical centres.

Institutional Care

Needy persons requiring institutional care are assisted through the social assistance program in meeting the costs of care in nursing homes, homes for the aged operated under religious auspices, and in proprietary boarding homes licensed by the Department of Public Welfare. In addition, there is a 220-bed institution (Hoyle's Home) which is operated by the provincial Department of Public Welfare.

During the year, the maximum rates payable varied from $75 per month in boarding homes to $240 per month for bedridden persons in approved institutions. Fifty homes for adults containing over 1,100 domiciliary and nursing beds, were listed as homes for special care. A comforts allowance of $15.00 per month is paid to needy residents of long-stay homes, hospitals and sanatoria.

Child Care

Federal contributions are made toward the cost of maintaining children placed in foster and group homes under the authority of the Child Welfare Act. This program is administered by the Child Welfare Division of the Department of Public Welfare through its district offices. The foster home rates in effect at the end of the year varied from $46 to $64 per month, depending on the age of the child in care.

The child welfare institutions covered for cost sharing include the Children's Home in St. John's which provides care for disabled children. Also listed are the Boys' and the Girls' Home and Training School which provide care for over 100 juveniles and six orphanages which care for about 500 children.

Welfare Services

Contributions under the Canada Assistance Plan are being made for new costs of welfare services provided through

the provincial Department of Public Welfare. These costs include administering the social assistance program and providing associated welfare services, as well as providing child care, protection and adoption services.

Significant Developments during 1968-69
relating to the Canada Assistance Plan

Regulations were enacted under the Welfare Institutions Licensing Act to govern licensing procedures, building, health and safety requirements, standards of care and special requirements for child care institutions.

The Social Assistance Regulations were amended to provide an amount of $25.00 per month for household maintenance and utilities to long term recipients living in rented accommodation. This allowance had been payable only to recipients living in their own homes.

Income ceilings for the thirty day period prior to application for short-term assistance were reduced from $85.00 to $75.00 for a single person, from $130.00 to $115.00 for two persons, from $155.00 to $135.00 for three persons, and from $25.00 to $20.00 for each additional member of a family.

The board and lodging rate for persons resident with landlords, who are related, was increased from $50.00 to $60.00 per month.

A new exemption on income was introduced concerning employed relatives living with an assistance recipient. Formerly such persons had to contribute at least $25.00 of earnings to the family income. Under the amendment they are not obliged to contribute to the family's income until they have earned sufficient funds to pay for their own food, clothing, and personal care. These costs are to be determined on the basis of social assistance rates.

The Welfare of Children Act was amended by the addition of Part III entitled "Concerning Juveniles and Training Schools". This amendment ensures the treatment of juveniles as misdirecte

and misguided children requiring help, guidance, training and encouragement.

PRINCE EDWARD ISLAND

General Assistance

General assistance is provided under the General Welfare Assistance Act. Benefits are determined on the basis of budgetary allowances for requirements which include food, clothing, shelter, household and personal items, fuel and utilities. Provision is also made for assistance to cover items of special need, including housekeeping services and materials or services required in rehabilitation. The program is administered by the provincial Department of Public Welfare, two municipalities, and two Welfare Bureaus in the City of Charlottetown.

Health Care Services

The General Welfare Assistance Act provides for the granting of aid to cover the costs of health care services. Such services may include necessary medical and surgical services, nursing, dental care, optical care, essential prescribed drugs and appliances.

Institutional Care

Persons in need in nursing homes, homes for the aged, hostels and other residential welfare institutions are assisted to meet the costs of care under the welfare assistance program. Persons in care are entitled to a comforts allowance of up to $10 per month. Maintenance rates are approved by the provincial director of the welfare assistance program.

During the year, ten institutions for adults having a total of 950 domiciliary and nursing beds were listed as homes for special care under the federal cost-sharing Agreement. Provincially operated institutions account for about 750 of these beds.

Child Care

Provincial payments are made for the maintenance of children who are placed in foster homes under the authority of the Children's Protection Act. The costs include those for neglected children permanently or temporarily committed by the Courts to the care and custody of the child welfare authorities.

Two child care institutions having a total of 85 beds were listed as homes for special care.

The child care program is administered by the Director of Child Welfare, Department of Public Welfare.

Welfare Services

Federal contributions are being made toward new costs of welfare services provided by the provincial Department of Public Welfare, including costs of administering the general welfare assistance program and of providing child care, protection and adoption services.

Significant Developments during 1968-69
relating to the Canada Assistance Plan

The General Welfare Assistance Regulations were amended to increase liquid assets permitted a recipient from $500.00 but not exceeding $1,000 to $750.00 but not exceeding $1,500. The change was effective April 1, 1968.

Under the authority of the Hospitals Act, the province enacted regulations governing the licensing of nursing homes and standards for their operation.

The Adoption Act was amended to provide for appeals to the provincial Court of Appeal, and to extend the authority of the Court of Chancery.

New board rates for foster children were set at $50.00 per month for children 12 years of age and over, and $45.00 per month for children under age 12. Clothing rates range

from $70.00 per annum for children of up to 2 years of age to $200.00 per annum for children 16 to 18 years of age.

NOVA SCOTIA

General Assistance

General assistance is provided under Parts I and II of the Social Assistance Act.

Provincial assistance is provided under Part I to needy families with dependent children, to disabled persons not able to qualify for aid under the Disabled Persons Act, and to foster children. Assistance is paid on the basis of a needs-test with maximum benefits to disabled persons amounting to $100 per month as of December 1, 1968. Benefits for needy families, calculated at seventy per cent of assessed budgetary requirements are paid up to a maximum of $150 per month.

Municipal assistance is provided under Part II of the Act to persons not covered by the provincial assistance program or to supplement provincial assistance. Under this Part, the province sets budget standards and also provides for the payment of assistance on the basis of need. Provincial contributions amount to seventy-five per cent or more of costs, depending on the fiscal capability of the municipality. Assistance is administered through municipal welfare departments and, in several areas, by the provincial Department of Public Welfare or a local children's aid society on behalf of the municipality.

Health Care

Medical services are provided through an agreement between the province and the Nova Scotia Medical Society to recipients of provincial assistance and long-term recipients of municipal assistance. Benefits include medical, surgical and obstetrical care and eye examinations. Additional assistance can be provided by the province or through municipalities to cover the costs of optical and dental care and drugs.

Institutional Care

Needy persons requiring institutional care are assisted by municipalities under Part II of the Social Assistance Act. Care is provided in sixteen municipal homes for the aged, four municipal homes for the disabled (which care mainly for retarded adults), and in a number of proprietary homes for the aged and nursing homes licensed by the Department of Public Welfare under the Boarding Homes Act or by the Department of Health under the Nursing Homes Act.

During the year, 95 homes providing nursing or domiciliary care for adults and having a total of about 3,300 beds were listed as homes for special care under the federal cost-sharing Agreement. Rates paid for care in each home are determined according to the types and levels of care provided and are approved by the Department of Public Welfare. The upper range of rates paid in homes for the aged was about $8.00 per day. Residents of homes may retain a comforts allowance of $15.00 per month.

Child Care

Federal contributions are being made toward the costs of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Act. Supervision of such children is the responsibility of the Family and Child Welfare Division of the provincial Department of Public Welfare, nine children's aid societies and three family and children's services. Payments for maintenance were based on monthly rates set by a committee established under the Child Welfare Act.

Provincially owned and operated child care institutions include the Nova Scotia Training School for Retarted Children at Truro, and four homes for retarded children. These have a bed capacity of over 300. Also provincially owned and operated are the Nova Scotia Boys' and Girls' Schools which care for about 185 juveniles; St. Euphrasia's Training School, under religious auspices, provides another 60 beds for the care of juveniles. Some ten child caring institutions operated by voluntary or religious organizations with a bed capacity of about 300 are also listed under the Plan.

Welfare Services

Federal contributions toward new costs of welfare services are being made for three kinds of agencies in Nova Scotia:

- the provincial Department of Public Welfare, including the headquarters administration and the thirteen regional and district offices;

- eighteen organized municipal departments of welfare that are responsible for the administration of assistance and the provision of related welfare services, and

- nine children's aid societies and three family and children's services in which the province pays the cost of supervising children in care and contributes, together with the municipalities, to the costs of protection services, services to unmarried mothers, and adoption services.

Significant Developments during 1968-69 relating to the Canada Assistance Plan

Permissive legislation was passed in 1968 to permit the processing of applications for disabled persons allowances under the Social Assistance Act. It is expected that in 1969-70 recipients of disabled persons allowances who can qualify under a needs test will be transferred to social assistance.

Effective April 1, 1968, costs of medications and testing materials used by diabetics who can meet a needs test are shareable under the Canada Assistance Plan.

As indicated previously assistance paid to disabled persons was increased from $75.00 to $100.00 per month effective December 1, 1968.

During the year Part I of the Social Assistance program was completely computerized.

The Social Assistance Regulations were amended to increase from $10.00 to $15.00 per month, the maximum comforts allowance paid by municipalities to needy persons in homes for special care, and mental and tuberculosis hospitals.

Another amendment raised to 75 per cent, the minimum provincial rate of reimbursement for municipal assistance and services costs for municipalities with properly constituted welfare departments. Communities formerly received from 50 per cent to 68 per cent of such costs.

During the year the Department of Public Welfare was re-organized and the Child Welfare Division became the Family and Child Welfare Division under the Direction of the Administrator of Family and Child Welfare. The Division has direct responsibility for special protection services and services for retarded children.

NEW BRUNSWICK

General Assistance

General assistance is provided under the Social Welfare Act which came into effect on January 1, 1967. Under this program, assistance can be provided to any person in need, including persons formerly granted provincial or municipal assistance. Benefits are determined on the basis of budgetary allowances which include set amounts for food, clothing, household and personal items, and maximum amounts for shelter, fuel and utilities. Provision is also made for items of special need. The program is administered by the province through a network of fifteen district offices, and two sub-offices.

Health Care Services

Health care services provided under the Social Welfare Act to recipients of assistance include the services of physicians, surgeons, obstetricians and other specialists. Medical cards are issued to recipients, and services are made available through an agreement between the province and the New Brunswic

Medical Society. Additional provision is made for other health needs, including diagnostic services, prescribed drugs, dental care and vision services.

Institutional Care

Needy persons requiring institutional care are assisted under the Social Welfare Act to meet the costs of care in homes for the aged, nursing homes and other types of residential welfare institutions. These homes are licensed under the Health Act. Rates are established in each home in accordance with the level of care provided and are approved by the provincial Director of Welfare. Residents of these homes retain $15 per month as a comforts allowance.

During the year, 90 institutions providing domiciliary or nursing care for adults and having a total of about 2,400 beds were listed as homes for special care under the federal cost-sharing agreement.

Child Care

Federal contributions are being made toward the cost of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Act. Since January 1, 1967, the province has been responsible for the maintenance of all children in care. Daily board rates are based on the age of the child, with additional amounts being paid for clothing, health services, education and other requirements.

Child care institutions include the New Brunswick Protestant Orphans' Home, Saint John, with 170 beds and three other institutions with over 100 beds.

Welfare Services

Contributions are being made under the Canada Assistance Plan for new costs involved in administering assistance under the Social Welfare Act, providing related welfare services, and extending child care and protection services. All services are provided by the province through its district offices.

Significant Developments during 1968-69 related to the Canada Assistance Plan

The Social Welfare Act was amended to add sections to deal with persons who attempt to obtain or who obtain assistance by fraudulent means. Provision is made for the recovery of monies obtained by fraud and for the punishment of offenders. This amendment was assented to on December 6, 1968, to come into effect on proclamation.

The Social Welfare Regulations were amended to establish the Pharmaceutical Advisory Committee to advise and assist the Minister of Health and Welfare in matters pertaining to an effective pharmaceutical program.

The Child Welfare Act was amended effective April 1, 1969, to place greater emphasis on the protection, care and rehabilitation of children.

QUEBEC[1]

General Assistance

General assistance is provided under the Public Charities Act and Regulations. This program includes assistance to the unemployed, assistance to widows and spinsters aged 60-65 years, supplementation to old age security pensioners, and supplementation to recipients of categorical allowances. Assistance to needy mothers is shared under the federal Unemployment Assistance Act, and administered under the Quebec Needy Mothers Allowances Act.

Assistance is determined in accordance with an extensive list of basic needs, with variable rates for food, clothing and fuel, and fixed rates for personal and household needs. Actual costs are paid for shelter and utilities. Assistance levels are based upon factors such as size of family and locality, thereby

(1) Federal financial support of the programs covered under the Canada Assistance Plan Agreement with Quebec is provided under the terms of the Established Programs (Interim Arrangements) Act.

taking into account higher costs in larger centres such as Montreal and Quebec City.

The assistance program is administered by the Social Assistance Directorate through regional offices of the Department of Family and Social Welfare, and by municipal and social welfare agencies.

Health Care Services

Medical care is provided to recipients of most classes of assistance. The program is authorized by the Medical Assistance Act and operates under an agreement between the province and medical associations. Assistance recipients are issued with medical assistance cards which entitle the holder and dependents to physicians' services, including medical and surgical services and certain diagnostic services. Drugs and other required services are provided as items of assistance under the Public Charities Act.

Institutional Care

Needy persons requiring institutional care are maintained in homes for the aged, nursing homes and other types of residential care institutions which are operated by religious and charitable organizations or are under private ownership. Licensing and supervision is carried out by the Department of Family and Social Welfare and in a small residual program by the Department of Health. Rates for the maintenance of needy residents are established on the basis of the level of care provided by the home and required by the resident.

During the year about 400 institutions providing domiciliary or nursing care to adults and having a total of almost 18,000 beds were listed as homes for special care under the federal cost-sharing agreement. Residents of these homes retain $22 per month as a comforts allowance. This amount is also paid to needy patients in hospitals and sanatoria.

Child Care

Federal contributions are made toward the costs of care and maintenance of children in child welfare institutions or in

the care of social agencies under the terms of the Public Charities Act. Full financial responsibility for the municipal share of child welfare costs has been borne by the province since April 1, 1966. Child care may be provided in a variety of children's institutions, foster homes, or private day nurseries. The full range of services spans the field from general supervision and care of normal children to the training of retarded children and includes intensive treatment and protection for children with psychological problems.

During the year, 85 child care institutions with almost 11,000 beds were listed as homes for special care. Fifty of these are classified as public assistance institutions, that is, they are operated under voluntary auspices and have a total of about 8,500 beds.

Welfare Services

Federal contributions are being made for new costs of welfare services provided primarily under the Public Charities Act, the Social Allowances Commission Act and the Adoptions Act, by the Department of Family and Social Welfare, by social welfare agencies, and by municipal departments of welfare.

Significant Developments during 1968-69 relating to the Canada Assistance Plan

Maintenance rates for maladjusted children placed in specialized institutions were raised from $7.00 per day to $9.00 per day retroactive to July 1, 1967.

Two new classes of child welfare beneficiary were established: children aged 18 to 21 living in group or foster homes and attending school for whom the maintenance rate is $3.33 per day, and children placed in private homes for whom the maximum rate of maintenance is $5.00 per day.

Rates of assistance for single employable persons unemployed for more than twelve months have been decreased from $80 to $30 per month for persons living with their families and from $90 to $55 per month for persons living away from their families.

ONTARIO

General Assistance

During the year there were two programs of a general assistance nature in effect in Ontario.

Persons and families in need who require maintenance on a long-term basis, may be granted an allowance under the Family Benefits Act. The Act provides for aid to persons 65 years of age or older who are not in receipt of an allowance under the Old Age Security Act; disabled or blind persons 18 years of age or over; mothers with dependent children if the father is absent or unemployed; women 60 to 65 years of age who are single, widowed, or whose husbands are absent; fathers with dependent children and foster mothers raising children other than their own.

Benefits are determined on the basis of pre-added budgets intended to cover food, clothing, household maintenance and sundries according to family size and composition, with additional provisions for fuel and shelter. Free medical and hospital insurance are provided. This program is administered by the province through its regional offices.

Persons not able to qualify under the provincial program are assisted under the municipally administered general welfare assistance program. Municipal assistance is also provided on the basis of need, using pre-added budgets and maximum shelter and fuel allowances set by the province. Under this program, provision is also made for granting additional assistance to recipients of old age security, categorical allowances, family benefits and rehabilitation allowances. In addition, the program provides that special assistance may be provided to or on behalf of persons in need. Such aid includes drugs, prosthetic appliances, funeral and burial costs. Municipalities are reimbursed by the province for eighty per cent of the cost of providing assistance for basic requirements and additional aid and fifty per cent of the cost of items of special assistance.

Health Care Services

Physician's services, including medical, surgical and obstetrical services, are provided to recipients of provincially administered benefits and municipal general welfare assistance through the Ontario Medical Services Insurance Program. Dental services may be provided by the province or a municipality under the Family Benefits Act or the General Welfare Assistance Act. Other health care services are provided on a supplementary basis by municipalities under the authority of the General Welfare Assistance Act.

Institutional Care

Institutional care for adults is provided through a number of programs in the province:

1. Elderly persons are cared for in over seventy homes operated by cities, counties, and districts under the Homes for the Aged and Rest Homes Act. These provide upwards of 14, 000 beds for the care of the aged. The province reimburses municipalities for seventy per cent of net costs of providing care for needy persons in such homes.

2. Aged, infirm and other persons are also cared for in over one hundred institutions operated by voluntary and religious organizations under the Charitable Institutions Act. These provide more than 8, 000 beds for the residential care of such persons. The province, during the year under review, reimbursed such homes for eighty per cent of their net costs, not exceeding the average daily costs of care and maintenance, established at $8. 00 per day.

3. Assistance to cover the costs of care for needy residents in proprietary nursing homes is provided by the province through the Family Benefits Act up to a maximum of $9. 50 per day or by municipalities through the General Welfare Assistance Act with provincial reimbursement to

municipalities amounting to eighty per cent of costs up to a maximum municipal contribution of $9.50 per day for nursing care in a licensed nursing home. These nursing homes number about 450 and provide over 14,000 beds, mainly for the care of aged persons.

4. Two hundred and twenty-five residential homes for special care with a total capacity of approximately 1,900 beds, are licensed to care for ambulatory persons discharged from mental hospitals and these homes have been added to the program for cost-sharing purposes. The cost of care for needy residents of such homes is paid by the province under the Family Benefits Act. The maximum cost shared in a nursing home is $9.50 per day and, when the resident does not require nursing care, $28.00 per week.

Residents of the above homes retain $15.00 per month as a comforts allowance.

Child Care

Federal contributions are made toward the costs of maintaining children placed in foster homes and in child care institutions under the authority of the Child Welfare Act, including the costs of caring for children placed by more than fifty children's aid societies in the province. Under this Act, the province and municipalities reimburse the children's aid societies for the costs of maintaining children on the basis of sixty per cent provincial and forty per cent municipal. Costs for the care and maintenance of children of unmarried parents are borne entirely by the province.

During the year, about 200 child-caring institutions with a capacity of some 2,700 beds were listed as homes for special care under the federal cost-sharing agreement. These include receiving and group homes operated by children's aid societies and institutions for the emotionally disturbed.

Welfare Services

Federal contributions are made toward new costs of welfare services provided by three kinds of agencies in the

province, namely, the administration of assistance and the provision of welfare services through the provincial Department of Social and Family Services; the cost of administering the General Welfare Assistance and other programs through about seventy municipal welfare departments; and the cost of providing child welfare services, including supervision of children in care, adoption services, protection services and services to unmarried mothers, through children's aid societies in the province.

Significant Developments during 1968-69 relating to the Canada Assistance Plan

The Family Benefits Act was amended on two points: the delegation of responsibility by the Director of Family Benefits, and appeal procedures.

The Director of the Family Benefits Branch, with the approval of the Deputy Minister of Social and Family Services, may authorize employees of the Department to exercise the power and duties conferred on the Director by the Family Benefits Act.

Section 11 of the Family Benefits Act which deals with the board of review and with appeals has been amended to: change the method of appointing members to the board of review; spell out appeal procedures to be followed by the board, and provide for further appeals on questions of law to the Court of Appeal for Ontario.

An amendment to the Regulations under the Family Benefits Act ended the exclusion of Indians, eligible for medical services from the Government of Canada, from coverage for medical and hospital care under the Family Benefits Act. Indians coming under the Indian Act are now eligible for free services under the Ontario Medical Services Plan.

A further amendment to Family Benefits Regulations extended the list of educational institutions a dependent child may attend to include public, separate, secondary and registered private schools, colleges and institutes and schools for retarded children.

The General Welfare Assistance Act was amended to provide applicants for and recipients of assistance with the right to appeal the decisions of municipal or regional welfare administrators. Appeals are to be made to the board of review established under the Family Benefits Act. (An amendment to the Vocational Rehabilitation Services Act provides for appeals, through the same channel, against decisions of the Director of Vocational Rehabilitation).

The Homes for the Aged and Rest Homes Act was amended and now provides for the establishment of such homes by Indian bands.

Regulations under the Day Nurseries Act were amended. The definition of a person in need now includes recipients of general welfare assistance, recipients of family benefits and persons unable to support their families and provide day nursery services. The latter group is needs tested by the staff of the day nursery using a form set out in the Regulations with some items requiring approval by the municipal welfare administrator.

Regulations under the Homemakers and Nurses Services Act increased provincial subsidies to municipalities for services provided to persons in need. The reimbursement rate has been increased to eighty per cent of total costs up to specified maxima which have also been increased.

MANITOBA

General Assistance

General assistance is provided through two programs, namely, provincial social allowances and municipal assistance.

Social allowances are provided to mothers in need, the physically and mentally disabled, persons 65 years of age or over, unemployed and unemployable residents of unorganized territories and on behalf of neglected children. Benefits are determined on the basis of budgetary amounts for food, clothing, fuel, utilities, household and personal needs, and shelter.

The social allowance program is administered directly by the province through a network of eleven regional offices.

Assistance is provided by municipalities on a short-term basis to persons not covered by the provincial social allowance program. This assistance is also provided on a needs-test basis using budget scales set by each municipality. The province reimburses municipalities for expenditures for assistance under a formula set out in the Social Allowance Act.

Health Care Services

Recipients of provincial social allowances are provided with medical, dental, and optical care and prescribed drugs under the Social Allowance Medicare Plan. Health care provisions for recipients of municipal assistance are made by the individual municipalities.

Additional health services may be provided as required to recipients of provincial assistance. Such services include home nursing and homemaker services, prosthetic appliances, physiotherapy, special rent or food allowances, and transportation to obtain health care.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in paying for their care through the social allowances program. In most instances, the care is provided in voluntary and proprietary homes located throughout the province.

The institutional care program is administered primarily by Care Services, a Section of the Department of Health and Social Services which is responsible for the development, licensing and inspection of homes and for the placement of individuals requiring special care.

During the year over eighty-five domiciliary and nursing homes for adults containing almost 5,000 beds were listed as homes for special care under the federal cost-sharing agreement. Payments are based upon rates that are set for each of the homes in accordance with the level of care provided.

With provincial approval, an institution may establish a comforts allowance. The usual amount of the allowance is $12 per month.

Child Care

Federal contributions are made toward the cost of caring for children that are placed in foster homes, group homes, and child care institutions under the authority of the Child Welfare Act. Payments during the year included costs for children placed in care by the province, by the four children's aid societies in the province, and by the Jewish Child and Family Service. Payments are based upon rates determined by an advisory committee established under the Child Welfare Act.

During the year some 30 child caring institutions with a capacity of 365 beds were listed under the federal cost-sharing agreement. While most of these were group foster homes operated by children's aid societies, eight were treatment institutions with the capacity to provide care for over 200 children.

Welfare Services

Federal contributions are made toward the cost of new welfare services provided by the provincial Department of Health and Social Services which administers social allowances and provides other welfare services through a network of regional offices, by municipal departments of welfare which are responsible for the administration of assistance and the provision of associated welfare services, and by four children's aid societies providing child care, protection and adoption services.

Significant Developments during 1968-69 relating to the Canada Assistance Plan

In September 1968, all services in the social service and health fields were integrated into one department designated as the Department of Health and Social Services.

An amendment to the Social Allowances Act authorized the payment of social allowances to persons who are unable to afford the special care required by their dependents. Special care is defined in the Regulations as care provided to a dependent of an applicant or recipient in a residential welfare institution or in a day nursery that has been approved by the Minister of Health and Social Services or care approved by the Director of Welfare and provided to a dependent by a nurse, housekeeper or homemaker in the home or in a foster home.

Clothing allowances for adults were increased. Changes were also made in the maximum amounts permitted to meet funeral costs.

A new Regulation specified items, which for reimbursement purposes, are included in the term "salary and wages of staff of the municipality engaged in full-time welfare work".

The list of health care services that may be provided to recipients was increased to permit rehabilitative treatment or care as authorized by the Director of Welfare.

The Child Welfare Act was amended with respect to procedures for the filing of court orders.

SASKATCHEWAN

General Assistance

General assistance is provided under the Saskatchewan Assistance Plan through which assistance may be granted to any person in need.

Benefits for long-term recipients are determined on the basis of budgetary allowances for basic maintenance, which include food, clothing, shelter, fuel, utilities and household and personal needs. Benefits for short-term assistance are based upon a pre-added budget covering all items except shelter for which actual expenditures are met. Provision is also made for granting assistance to cover a variety of items of special need, including household equipment, housekeeping allowances, and items incidental to education or employment.

The Saskatchewan Assistance Plan is administered by the provincial Department of Welfare through its regional offices, except in the municipalities of Prince Albert and Moose Jaw where assistance is granted through municipal social service departments.

Health Care Services

Health care services are provided to persons who qualify for assistance under the Saskatchewan Assistance Plan. The benefits include physicians' services, diagnostic services, laboratory procedures and dental surgery, all of which are provided through the universal medical care program administered by the Medical Care Insurance Commission. Additional benefits, such as optical and dental services (including eye glasses and dentures), physiotherapy, chiropody, drugs and appliances are provided when required through the Medical Services Division of the Department of Health.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes, homes for unmarried mothers and other types of residential welfare institutions for adults are assisted in meeting the costs of such care through the Saskatchewan Assistance Plan. These homes are licensed and inspected by the Department of Welfare under the Housing and Special Care Homes Act. A large proportion of such homes have been constructed in recent years with the assistance of long-term, low-interest loans under the National Housing Act and are operated by voluntary groups or municipal corporations.

During the year, there were almost 100 such institutions containing a total of 5,000 nursing and domiciliary beds which were listed as homes for special care under the federal cost-sharing agreement. Maximum rates payable were $194 per month for supervisory and limited personal care and $274 per month for nursing care. In cases of hardship the Director of Public Assistance may waive the maximum on rates. Residents of these institutions retain a comforts allowance of $10.00 per month.

Child Care

The child care program is administered directly by the provincial Department of Welfare through its regional offices. Payments are made for maintenance, health care and other needs of children who have been placed in foster homes, group homes or child care institutions under the authority of the Child Welfare Act. Such care is provided to children who are found by the courts to be neglected and to children voluntarily committed to the Crown by their parents.

During the year ten child caring institutions with a capacity of 175 beds were listed as homes for special care under the federal cost-sharing agreement.

Welfare Services

Federal contributions are made toward the new costs of welfare services provided by the provincial Department of Welfare and the Social Service Departments of the cities of Moose Jaw and Prince Albert. Contributions in the provincial department go toward the costs of administering the Saskatchewa Assistance Plan, providing associated welfare services through regional offices and sub-offices, and the cost of providing child welfare services, including supervision of children in care, protection services, and adoptions.

Significant Developments during 1968-69 relating to the Canada Assistance Plan

An Act to repeal the Old Age Assistance Act came into force on July 1, 1968.

The Saskatchewan Assistance Plan Act was amended concerning municipal loans to raise funds for assistance, rights of appeal, and agreements to recover emergency assistance paid.

Any municipality that itself or in association with other municipalities administers assistance to the needy may borrow money to permit it to carry out this responsibility.

A new section of the Act permits not only the public, but also the Director of Public Assistance to appeal any decision made by the appeal committee of a local or district unit.

The new section concerning recovery for emergency assistance granted differs from the former section by stating that recovery may be made only if the resources received are greater than necessary for the person's maintenance and livelihood.

The Regulation governing the means test supplemental allowance was amended to provide that any recipient of old age assistance on March 31, 1968, who qualifies under the residual means test would continue to receive the payment providing he did not qualify for a larger payment under the needs test.

ALBERTA

General Assistance

General assistance is provided through the provincial social allowance program and through the municipal assistance program.

Social allowances are granted to persons in need because of age, physical or mental incapacity; to parents with dependent children; to persons taking rehabilitation courses, and on behalf of children in the home of a guardian.

Benefits are based upon rate schedules for food and clothing which are adjusted annually to reflect changes in the cost of living. Allowances for shelter are paid up to levels accepted as the standard for health and decency in the community in which the recipient lives. The social allowance program is administered directly by the provincial Department of Social Development through a network of regional offices.

Municipal assistance is provided on a short-term basis to persons, usually unemployed employables, resident in the community who do not qualify under the provincial social

allowance program. Eligibility is determined through an assessment of need using budgetary standards which are set at the discretion of municipalities. The province reimburses municipalities for eighty per cent of their expenditures for assistance.

Health Care Services

Payroll recipients receive medical and hospital coverage under the Alberta Health Plan. Other health services such as dental, chiropractic and optical care are provided through a Treatment Services Card and prescription drugs are authorized through a stub attached to the monthly cheque. Health care services for voucher recipients are provided on an individual basis.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in meeting the cost of such care through the social allowances program. Care may be provided in provincial, municipal or voluntary homes which are licensed and supervised under the Welfare Homes Act by the Homes and Institutions Branch of the Department of Social Development or in proprietar nursing homes licensed and supervised by the Department of Health under the Nursing Homes Act. A network of senior citizens lodges, built by the province and operated by the municipalities, provides domiciliary care.

During the year over 135 homes with 8,200 domiciliary and nursing beds for adults were listed as homes for special care under the federal cost-sharing agreement. There were over forty-five contract nursing homes in which the rate is $8.00 per day and sixty-five senior citizens lodges in which rates range from $70.00 to $85.00 per month. Residents of these homes retain a comforts allowance of $15.00 per month.

Child Care

Child welfare services in Alberta are administered mainly by the province under the Child Welfare Act, with the

full costs of maintenance being assumed by the province. Maintenance costs may include care in a foster home, at per diem rates which vary with the age of the child. Costs for clothing, health care and school supplies are also met by the province.

During the year, some 30 child caring institutions with a capacity of about 900 beds were listed as homes for special care under the federal cost-sharing agreement.

Welfare Services

Three types of welfare services were included during the year as shareable costs under the Canada Assistance Plan Agreement:

- direct services provided through the regional offices of the provincial Department of Social Development, including the administration of the social allowance and social assistance programs and the provision of child care and family services;

- the administration of assistance through municipal departments of welfare in ten major municipalities;

- the provision of welfare services by voluntary agencies primarily under the Preventive Social Services program.

Significant Developments during 1968-69 relating to the Canada Assistance Plan

During the year the province amalgamated its social allowance and social assistance programs into a social allowance program. Allowances are paid by payroll or voucher.

Effective April 1, 1968, food and clothing allowances for recipients of social allowances were adjusted. Monthly food allowances were increased, except for children under one year of age, for whom the rate remained unchanged. Clothing rates

for adults were increased. Most clothing rates for children were increased, the amounts depending on the age and sex of the child.

Under the amended Social Allowance Regulations, an applicant for a social allowance, who shows reasonable rehabilitative potential, may be granted an exemption for one year from the provision limiting assets to $500 for a person without dependents and $1, 000 for a person with dependents.

BRITISH COLUMBIA

General Assistance

Two general assistance programs are operated in the province: social allowances, and supplementary social allowances.

Social allowances are paid to any needy person requiring assistance on a short or long-term basis, except persons eligible for old age assistance or blind or disabled persons allowances which the province continued to grant during the year. Budgets are determined on the basis of rate scales set by the province covering food, clothing, household operation and sundry expenses, and shelter costs. The program is administered through regional and district offices of the Department of Social Welfare, except in thirteen major municipalities where administration is undertaken through municipal departments of welfare.

Supplementary social allowances may be granted to recipients of old age security, old age assistance, and blind and disabled persons allowances and are paid on the basis of need up to established income ceilings. The program is administered by the provincial Old Age Assistance Board, with applications being accepted through the district offices of the Department of Social Welfare or municipal welfare offices.

Health Care Services

Health care coverage is provided by the issuance of a medical card to long-term recipients of social allowances and

persons receiving supplementary social allowances. Physicians' services, including medical, surgical and obstetrical care, are made available through an agreement between the province and the British Columbia Medical Association. Other services provided include eye examinations and prescribed drugs to the extent covered in a drug benefit list. Basic dental care is provided under an agreement with the provincial Dental Association in cases where it is specifically authorized by the department.

Institutional Care

Needy persons who require care in homes for special care are assisted in meeting the costs of this care through the social allowances program. Care may be provided in boarding homes licensed by the Welfare Institutions Licensing Board and in "nursing homes" licensed under the Private Hospitals Act. During the year, 360 boarding homes with 6,100 beds and seventy-five nursing homes with 3,200 beds were listed as homes for special care for federal cost-sharing purposes. Maximum assistance rates paid were $120 per month for boarding home care and $245 per month for nursing home care. Residents may retain $16.00 per month as a comforts allowance.

Child Care

Federal contributions are made toward the cost of care provided to children who have been placed in foster homes, group homes and child care institutions under the authority of the Protection of Children Act. The costs shared included maintenance payments to foster parents which varied from $50 to $75 per month depending on the age of the child, and clothing allowances, health care services and school supplies. The child care program is administered by Children's Aid Societies in Victoria and Vancouver and through the district offices of the Department of Social Welfare in other parts of the province.

During the year, some 100 child caring institutions with a capacity of 775 beds were listed as homes for special care for federal cost-sharing purposes.

Welfare Services

Federal contributions are made toward new costs of welfare services provided through the provincial Department of Social Welfare, including costs of administering social allowances and supplementary social allowances and providing related child and family welfare services through a regional office structure. They are also made for the costs of administering assistance and providing services through fourteen municipal welfare departments and of providing adoption, protection and other child welfare services through the three Children's Aid Societies located in Victoria and Vancouver.

Significant Developments during 1968-69 relating to the Canada Assistance Plan

Effective June 1, 1968, the social allowance rate for dependent children was increased by $8.00 per month. A supplementary children's clothing allowance of $15.00 per annum and a supplementary community recreation program grant of $15.00 per annum for each child over six years of age were authorized. The supplementary allowance for children's school supplies was also increased by $5.00 to $15.00 per annum per child.

For recipients of categorical allowances, maximum budgetary limits for supplementary social allowances were increased effective June 1, 1968, to $137.10 for single recipients and $244.20 for married couples, and, effective January 1, 1969, to $139.20 and $248.40, respectively for recipients of either categorical allowances or old age security.

Amendments to the Adoption Act provide that, in the case of permanent wards, consent to adoption is required only of the guardian, that is, the Superintendent of Child Welfare or a children's aid society. Adoption by a single adult is now permitted.

The Welfare Institutions Licensing Act was amended to provide for the making of Regulations prescribing the number of welfare cases to be accommodated in any welfare institution, such cases to be given preference of admission as equivalent vacancies occur.

An amendment to the Protection of Children Act provides for a temporary period of care for children who are found to be in need of protection. The period of care is to be determined by the Supreme Court of the province, but must not exceed twelve months. When efforts to assist parents to care for their children fail, the Court may order a child permanently into the care of the Superintendent of Child Welfare or of a children's aid society. Appeal procedures are provided for immediate appeal from any order, and for subsequent review of a child's situation.

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ADA ASSISTANCE PLAN 69-70 ANNUAL REPORT

Health and Welfare Canada
Santé et Bien-être social Canada

ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1970

The Honourable John Munro, P.C., M.P.,
Minister of National Health and Welfare,
Ottawa.

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1970.

Respectfully submitted,

Joseph W. Willard,
Deputy Minister of National Welfare

ANNUAL REPORT
CANADA ASSISTANCE PLAN
YEAR ENDED MARCH 31, 1970

The Canada Assistance Plan was enacted by Parliament and came into operation during 1966-67. It received Royal Assent on July 15, 1966, with retroactive effect to April 1st of that year.

The Plan is a measure for supporting the integration, broadening and improvement of provincial and municipal public assistance programs and encouraging the extension and development of welfare services. Under it, contributions amounting to fifty per cent of shareable costs are made toward provincial and municipal expenditures for public assistance and welfare services.

Following enactment of the Plan, Regulations under Part I, General Assistance and Welfare Services, were developed in close collaboration with the provinces and were adopted by the Governor-in-Council on February 8, 1967. All provinces had signed Agreements under the Plan by August, 1967.

Agreements under Part III of the Plan, which covers work activity projects, were developed during 1967-68 and Regulations formulated to permit federal sharing in the cost of such projects. Seven provinces had signed Agreements under Part III by March 31, 1970.

No Agreements have been signed under Part II of the Plan which covers assistance and welfare services for Indians on reserves and in unorganized territory.

OBJECTIVES AND MAIN FEATURES OF THE PLAN

The Canada Assistance Plan has two primary objectives. These are to support the provision of adequate assistance to persons in need and to encourage the development and extension of welfare services designed to help prevent and remove the causes of poverty and dependence on public assistance.

The Plan, and the Regulations and Agreements under it, are the result of close and continuing federal-provincial collaboration at the ministerial and official levels. This collaboration is being continued in the administration of the Plan.

The following are the main features of the Canada Assistance Plan:

Comprehensive Approach

Support is provided for the development of integrated, comprehensive general assistance programs enabling provinces to meet the varying requirements of different groups within one program and administrative framework. Where there were formerly four federal-provincial assistance programs - for the aged, the blind, the disabled, and the unemployed - the Canada Assistance Plan makes it possible for the provinces, at their option, to combine these into a single program.

Assistance on the Basis of Need

The Plan provides for the granting of assistance on the basis of an assessment of a person's budgetary requirements as well as his income and resources, rather than, as in the "categorical" programs, on the basis of income and resources only. No upper limit is placed on the benefits for which 50 per cent federal contributions are available.

Definition of Assistance

The comprehensive definition of assistance in the federal statute carries a strong rehabilitative emphasis. It covers a broad range of recurring material needs, health care services, a variety of special needs and specified welfare services.

Supplementation of Income

An important feature of the Plan is the provision of federal contributions toward the cost of supplementary payments over and above benefits paid under income maintenance programs such as Old Age Security (including the Guaranteed Income Supplement), the Canada Pension Plan, the Quebec Pension Plan, Unemployment Insurance, other income, and earnings from employment.

Health Services

The Plan covers the cost of health care services for persons in need. Included are medical and surgical services, nursing, dental and optical care, drugs, prosthetic appliances, and other health services. To the extent that medical services are covered under the national Medicare program in any province, the sharing provisions of the Plan are not applicable.

Mothers Allowances and Child Care

Under the Plan federal sharing extends to programs providing aid to needy mothers and their dependent children (formerly mothers' allowances) which are now incorporated into general assistance programs administered by the provinces. Federal sharing is extended also to costs of maintaining children in the care of child welfare authorities. Most of these children live in foster homes.

Institutional Care

The Plan provides for federal sharing in the cost to the provinces and municipalities of maintaining needy persons in a wide range of residential welfare institutions, known collectively as homes for special care. These include homes for the aged, nursing homes, homes for unmarried mothers, hostels for transients and child care institutions.

Administration and Welfare Services

Contributions are made toward the cost of strengthening the administration of public assistance programs and extending associated welfare services. The services that may be supported include rehabilitation, casework, counselling, assessment, adoption, homemaker and day care services, and community development.

Indian Welfare

Federal-provincial Agreements are authorized under Part II of the Plan to provide for the extension, with the consent of Indian bands, of provincial welfare programs to Indians living on reserves or in unorganized territory in the provinces. The Plan provides for federal sharing on the basis of a special financial formula that takes into account the higher expenditures that would be incurred by the provinces in assuming this responsibility.

Work Activity Projects

Provision is made under Part III of the Plan for special work activity programs to help improve the motivation and work capacity of persons who have not been able to take full advantage of training opportunities, or who have unusual difficulty in securing or retaining employment.

BACKGROUND AND DEVELOPMENT OF THE PLAN

Previous Public Assistance Legislation

The Canada Assistance Plan has its roots in the public assistance programs which are being consolidated under it, particularly the federal-provincial programs of blind persons allowances, disabled persons allowances and unemployment assistance. Old age assistance, the fourth such program, became inoperative, except for certain residual cases, on January 1, 1970, when old age security became payable at age 65. These shared-cost programs were, in turn, preceded by a variety of measures to aid the poor, some of which date back to the early history of the provinces. With the advance of industrialization toward the end of the nineteenth and in the early decades of the twentieth century, public assistance programs began to assume major dimensions. It was then that it became necessary for the provincial and federal governments to accept responsibilities previously carried by voluntary agencies and institutions or by municipalities.

Initially the senior governments left responsibility for general assistance with the municipalities and gave special attention to readily definable groups regarded as having strong claims to aid on a more assured basis. An early example of such groups was widows with dependent children for whom provincial mothers allowances programs were introduced during and after the First World War.

The enactment of the Old Age Pensions Act in 1927 marked the beginning of federal-provincial co-operation in the provision of assistance to a special group. Under the Act the federal government undertook to pay half the cost of pensions of up to $20 per month granted by a province to persons 70 years of age and over who met the residence requirements and means test set out in the federal Act.

The most significant amendments to the Old Age Pensions Act were the increase in federal contributions to 75 per cent of costs in 1931 and the extension of coverage in 1937 to blind persons 40 years of age and over. In 1951 the Act was replaced by two federal-provincial programs - the Old Age Assistance Act covering persons between the ages of 65 and 70, and the Blind Persons Act covering blind persons over the age of 21 (reduced in 195[illegible] to age 18). In the same year the federal Old Age Security Act was passed providing a universal flat rate pension for persons 70 years of age and over.

A third federal-provincial program designed for the permanently and totally disabled was adopted in 1954 with the enactment of the Disabled Persons Act. It also employed a means test under which the applicant's income and property were taken into consideration in determining eligibility

for a pension and, like old age assistance, it provided for a federal contribution of 50 per cent of assistance granted. The Blind Persons Act differed in that it provided for a federal contribution of 75 per cent and allowed higher income ceilings in determining eligibility.

Historically, the federal government made grants to provinces and municipalities for general assistance in two periods of economic depression. The first occurred just after the First World War and the second during the 1930's. During the latter, grants were made on a large scale to meet assistance costs resulting from massive unemployment.

To avoid a similar situation that was expected to occur after the Second World War, the federal government established a national contributory unemployment insurance program in 1940, with contributions beginning July 1, 1941. In 1945, as part of a comprehensive post-war plan of reconstruction, the federal government also proposed the establishment of an unemployment assistance program which it would finance and administer in conjunction with unemployment insurance. However, the federal and provincial governments failed to reach agreement on the 1945 proposals and no action was taken on unemployment assistance until 1956.

In that year, the Parliament of Canada enacted the Unemployment Assistance Act which, contrary to the approach proposed in 1945, provided for a shared-cost program under which assistance would continue to be administered by the provinces and their municipalities. The Act initially contained a population threshold feature under which federal contributions began only when the number of persons receiving assistance exceeded a stated percentage of the population; this was designed to limit federal sharing to the costs of assisting the employable unemployed. In 1957, the threshold was removed and the measure moved in the direction of becoming a general assistance program, although it retained a number of important exclusions which caused it to fall well short of being a comprehensive assistance measure.

The unemployment assistance program differed from the three categorical allowance programs in that it did not specify the conditions of eligibility under which assistance had to be granted, except for the requirement of being unemployed and in need, and it placed no ceiling on the rates of assistance to be shared. The provinces were thus free to develop their general assistance programs along lines best suited to their needs. With the stimulation of federal funds, the provinces made extensive improvements in the coverage and benefits provided under their general assistance programs in the period from 1956 to 1966, and the groundwork was laid for the adoption of a single assistance measure through which help could be provided on the basis of need to any person requiring it.

Development of the Canada Assistance Plan

At the federal-provincial conference called in September 1963 to discuss the development of a new contributory wage-related social security measure, the Canada Pension Plan, it was recognized that there was also need for an improved public assistance program. The question was further considered at the federal-provincial conference of Prime Ministers and Premiers in November 1963, which recommended the establishment of a federal-provincial working group to review the operation of all joint welfare programs, in preparation for discussion by Ministers.

A working party of federal and provincial Deputy Ministers of Welfare and other officials met in February 1964 to identify the issues that would have to be considered in developing an improved assistance program. In May 1964, the Ministers of Welfare met in Ottawa to review the proposals of the working group. They recommended that the federal government and the provinces work toward an integrated, comprehensive general assistance program based on meeting need. The provincial Ministers also recommended that the federal government share fully in the costs of mothers allowances, health services and administration.

An additional factor that supported the development of more effective assistance and welfare service programs was the growing concern being expressed about problems of poverty. It was increasingly recognized that the talents of many Canadians were being wasted because of poverty, illness, inadequate education and training, and inequality in opportunities for work. In developing its legislative program in 1965, the government concentrated particularly on bringing forward a group of measures designed to combat these problems by improving the opportunities of people affected by them.

One of the government measures referred to in the Speech from the Throne in April 1965 was the Canada Assistance Plan. It was described as a means of providing a framework for federal-provincial co-operation in helping those who need help the most. The objectives of the program would be to encourage the provision of adequate levels of assistance to persons in need and to support the development of social welfare services to assist such persons in achieving the greatest possible measure of self-support.

The government's proposals for the Canada Assistance Plan were reviewed at a second meeting of Ministers of Welfare held in April 1965, and the basic features of the Plan were approved. A third meeting of Ministers of Welfare was held in January 1966, when additional suggestions relating to the coverage of the Plan were made, including proposals for

its extension to children and youth in the care of child welfare authorities. The extensive federal-provincial collaboration in the development of the Plan ensured its relevance to varying conditions across Canada and its acceptability to the provinces which carry administrative responsibility for the programs supported by it.

A motion for the introduction of the Canada Assistance Plan Bill was placed before the House of Commons on April 4, 1966; the Bill passed first reading on June 21st and received third reading in the House of Commons on July 8th and in the Senate on July 12th. Notice of Royal Assent to the Bill was given in the Canada Gazette on July 23rd, 1966.

Development of Regulations and Agreements

Following the enactment of the legislation, extensive consultations were held with the provinces concerning the Regulations and Agreements under the Plan. The Regulations, adopted by Order-in-Council on January 26, 1967, provided further definitions of terms as required by the legislation, outlined the kinds of costs for which contributions could be made, and indicated the basis for payment of claims under the program. These were carried forward into the Agreements which outlined the undertakings by the provinces and Canada under the Plan. The dates on which Agreements under Part I were made with the provinces are indicated below. All Agreements were retroactive to April 1, 1966 for purposes of cost sharing.

Newfoundland	March 30, 1967
Prince Edward Island	March 30, 1967
Nova Scotia	March 22, 1967
New Brunswick	April 5, 1967
Quebec*	August 21, 1967
Ontario	March 28, 1967
Manitoba	March 20, 1967
Saskatchewan	March 22, 1967
Alberta	March 30, 1967
British Columbia	March 23, 1967
Yukon Territory	December 16, 1969

* The Agreement with Quebec employs Section 19 of the Canada Assistance Plan which provides that the terms of the Established Programs (Interim Arrangements) Act apply to the Plan, rather than to the four pre-existing shared-cost public assistance programs which were in effect when that Act was passed.

APPLICATION OF THE CANADA ASSISTANCE PLAN

Assistance to Persons in Need

A primary objective of the Plan is to support the provision of adequate assistance to persons in need. Contributions are made toward the cost of assistance granted on the basis of a needs test, that is, a test under which the budgetary requirements, as well as the income and resources, of applicants and their dependents are taken into account. This is in contrast to the means test under which only income and assets computed as income are taken into account within set benefit and income ceilings.

The major costs of assistance for which contributions are made under the Plan are for basic requirements which are defined in the legislation as food, shelter, clothing, fuel, utilities, household supplies and personal requirements. When provinces entered agreements under the Plan, they agreed to take these requirements into account in determining eligibility for assistance. Allowances for items such as food, clothing, household supplies and personal requirements are usually based on rate scales set by the provinces. These allowances vary with family size and composition. For other budgetary items such as shelter, fuel, and utilities, actual costs to the recipient are generally used.

The rehabilitative emphasis in the Plan is reflected in its provision for contributions toward the costs of welfare services purchased for persons in need and items of special need obtained for such persons. Welfare services, which may be purchased on a fee-for-service basis, include rehabilitation, casework, counselling, assessment, and homemaker and day-care services. The items of special need toward which contributions may be made include tools or equipment that are essential in enabling a recipient to obtain employment and items necessary for his safety, well-being or rehabilitation. These include household equipment and furnishings, repairs to property, special food or clothing and items required by disabled persons.

Expenditures for items of special need exceeding $500 in cost require the approval of the Director of the Canada Assistance Plan. Contributions were made during the year for such items as building supplies for repairs and additions to dwellings, installation of furnaces, plumbing and wiring, household furnishings and prostheses.

The Plan is designed to support the provision of assistance to any person in need, whatever the cause of his need. The legislation does identify, however, the major groups to whom assistance is to be provided.

These are described as persons who are unable to provide adequately for themselves because of inability to obtain employment, loss of the principal family provider, illness, disability, or age. Other persons such as those who are employed but who require supplementary help may also be assisted.

The programs through which assistance is granted are variously known in the different provinces as social assistance, social allowances, general assistance, family benefits and general welfare assistance. The patterns of administration for these programs vary from province to province. In Newfoundland and New Brunswick, the province has assumed total responsibility for the administration of assistance. This is also true in Saskatchewan with the exception of the municipal units of Prince Albert and Moose Jaw, and in Quebec with the exception of Montreal. In the provinces of Nova Scotia, Manitoba, Alberta, and Ontario, assistance is provided through a combination of provincial and municipal administration. A similar pattern is found in Prince Edward Island and British Columbia. However, in Prince Edward Island two welfare bureaus in Charlottetown also administer assistance. In British Columbia supplementary social allowances for old age pensioners are administered by the provincial Old Age Assistance Board. In provinces where both the province and its municipalities provide assistance, persons expected to be in need on a long-term basis are usually assisted through provincial programs, while those whose needs are of shorter duration are assisted by municipalities.

Maintenance of Children

The assistance provisions of the Plan also cover children under the age of twenty-one who are in the care or custody or under the control or supervision of child welfare authorities. This extends to children, most of whom are in foster homes, that have been placed in the care of such authorities by court order or by agreement with the parents. The assistance costs for which contributions may be made include foster home payments, frequently based on standard rates for various age groups, health care services and other needs of children. The programs covered include those administered by provincial child welfare authorities and through children's aid societies.

In the provinces of Newfoundland, Prince Edward Island, New Brunswick, Quebec, Saskatchewan and Alberta the provincial departments of welfare are responsible for the administration of child welfare programs. This responsibility is borne by the provincial authorities together with children's aid societies in Ontario, British Columbia, Manitoba and Nova Scotia.

Institutional Care

The costs of providing care for persons in need who are in residential welfare institutions are also covered under the Plan. These institutions are referred to as homes for special care and include homes for the aged, nursing homes, hostels for transients, homes for unmarried mothers, child care institutions and other residential welfare institutions that have the primary purpose of providing supervisory, personal or nursing care or social rehabilitation. The Plan does not cover care provided in hospitals, correctional institutions or institutions whose primary purpose is education. The homes for special care provisions of the Plan were carried forward from the Unemployment Assistance Act and extended to cover child care institutions such as receiving homes, orphanages, some institutions for delinquent youth and specialized welfare institutions for children with physical or mental disabilities.

At the end of the year, some 2,850 institutions with a capacity of more than 112,000 beds had been recognized as homes for special care. Of these institutions 2,350, with a capacity of about 94,000 beds provided institutional care to adults and 500 with a capacity of about 18,000 beds provided institutional care to children.

Health Services

Under the Plan the federal government may reimburse the provinces for half the cost of health care services provided to persons in need. The definition of health care services covers medical, surgical, obstetrical, dental and nursing services, including drugs, dressings, prosthetic appliances, and other items or services associated with the provision of specified services. The Plan excludes services provided under any federal-provincial shared cost health measure. At present this applies in respect to insured services within the meaning of the Hospital Insurance and Diagnostic Services Act or any other prescribed hospital care services, and services covered under the Medical Care Act in any participating province. Consequently, major areas of coverage under the Canada Assistance Plan are optical, dental and nursing services, drugs and medical supplies, and payment of medical insurance premiums on behalf of persons in need.

Welfare Services

As a means of supporting the development of preventive and rehabilitative programs, the Plan authorizes contributions toward provincial and municipal expenditures for welfare services. These are described,

generally, as services that have as their object the lessening, removal or prevention of the causes and effects of poverty, child neglect or dependence upon public assistance. More particularly, they include rehabilitation services, casework, counselling and assessment services, homemaker and day-care services, and community development. Services related wholly or mainly to education, correction, recreation or the provision of health or hospital care are not covered. Administrative, secretarial and clerical functions associated with the provision of welfare services and the administration of assistance are covered, as are staff training, consultation, research and evaluation associated with welfare programs. The latter are included as a means of supporting improvements in the effectiveness of personnel and encouraging assessment of programs in relation to their objectives.

An important feature of the Plan is its emphasis on prevention of the personal and social problems that lead to poverty, family breakdown and the need for public assistance. Thus, contributions can be made for costs of welfare services extended not only to persons in need, but also to persons who may become needy if they do not receive such services.

The Plan is intended to encourage the improvement of existing services and the development of new ones. In view of this, contributions are made toward provincial or municipal expenditures for welfare services that are beyond those incurred during a period referred to as the base year; in the case of provincial departments, this is the fiscal year 1964-65. The major types of cost that are shared are salaries and wages, travel costs, attendance at conferences and seminars, certain costs of staff training and development, and fees for consultation and research.

Contributions are made when services are provided through departments or agencies that have been recognized as provincially approved agencies under the Plan. Most of the agencies in which costs are shared are provincial and municipal departments of welfare, the latter varying in size from departments employing only one or two officers to those in metropolitan areas employing several hundred persons. Some 200 municipalities are claiming for sharing in the cost of providing welfare services.

Contributions are also made, toward costs incurred by voluntary agencies to the extent that these are supported from provincial or municipal funds. These include children's aid societies, family bureaus and other agencies providing services such as child care, family counselling, homemaker and day care services. Some 330 voluntary agencies are recognized for cost-sharing purposes under the Plan.

Relationship to Categorical Programs

A basic aim of the Plan is to support the development of integrated programs through which assistance can be provided to any person in need. In line with this aim, Part V of the Plan enables the provinces, at their option, to cease accepting applications for old age assistance and for blind and disabled persons allowances and begin assisting the aged, the blind and the disabled through general assistance programs. Persons who have already qualified for allowances under these programs can be transferred to a general assistance program if they will qualify for comparable or greater benefits under that program.

Saskatchewan ceased to accept applications for categorical allowances on April 1, 1966 and transferred major portions of its existing caseloads to the Saskatchewan Assistance Plan. Ontario took similar steps with effect from April 1, 1967 and transferred a major portion of its caseloads to the Family Benefits program. Alberta ceased accepting applications under the categorical programs on January 1, 1968. Newfoundlan ceased to accept applications for old age assistance and disabled persons allowances on December 31, 1967, and June 30, 1967, respectively, and, where possible, transferred recipients to general assistance. In Prince Edward Island, applications for old age assistance ceased to be accepted on April 1, 1967 and applications for disabled persons allowances on May 1, 1967; part of the caseload under both programs was transferred to general assistance. Nova Scotia ceased accepting applications under the disabled persons program on December 1, 1968, and transferred recipients who could qualify for comparable benefits to their social assistance program.

With the lowering of the eligible age for Old Age Security, the old age assistance program was phased out on January 1, 1970, except for certain residual cases who could not qualify for the Old Age Security pension, not having had the required one year's residence in Canada prior to date of application. This means that persons who, on attaining age 65, would have applied for assistance under the old age assistance program are now granted a pension under the Old Age Security program.

Provisions of Agreements under the Plan

In entering Agreements under the Plan, provinces have undertaken to meet a number of criteria that are called for in the legislation. They have agreed to the use of a needs test in determining eligibility for assistanc and have undertaken to provide assistance to any person in need in an amount or manner that takes into account his requirements, for food, shelter, clothing, fuel, utilities, household supplies and personal

requirements. The needs test, which is basically a budget-deficit approach to determining eligibility for, and the amount of assistance to be provided, takes into account the budgetary requirements of the applicant as well as the income and resources he has available to meet them.

The provinces have agreed not to require a period of residence within their boundaries as a condition of eligibility for assistance. They have also undertaken to provide in their law a procedure for appeals from decisions respecting applications for assistance or the granting of assistance, and to provide for an adequate method by which that procedure will be brought to the attention of applicants for assistance or recipients of assistance.

In recognition of the preventive and rehabilitative emphasis of the Plan, the provinces have undertaken to continue, as may be necessary and expedient, the development and extension of welfare services. This involves a number of approaches ranging from the hiring of additional staff to the collection and sharing of information through the preparation of reports, the use of consultants, and the development of statistical reporting systems.

Description of Provincial and Municipal Programs

The Canada Assistance Plan sets broad conditions under which the costs of assistance and welfare services can be shared. Within this general framework, however, contributions can be made toward costs of programs that are developed and administered in the manner best suited to individual provincial circumstances and preferences. Brief descriptions of the programs for which costs are shared in each province are given in the Appendix, together with a résumé of significant developments that took place in each province during 1969-70. The Appendix describes the programs as they stood at the end of the fiscal year.

ADMINISTRATION OF THE PLAN

The program is administered by the Canada Assistance Plan Division in the Welfare Assistance and Services Branch. This Division is also responsible for administering the unemployment assistance program and the old age assistance and blind and disabled persons allowances programs. The Division consists of administrative and consultative staff at headquarters and field staff located in nine of the provinces.

Canada has undertaken, in Agreements with the provinces, to provide consultative services, where feasible, and as requested, in areas related to the development and operation of assistance and welfare

services programs. At the end of the year, consultative services were available in relation to Indian welfare, institutional care, accounting and auditing, welfare services, community care services, work activity, rehabilitation, family and child welfare, public assistance policy and administration, community development, and staff training and development. Particular areas of discussion and consultation during the year included appeal procedures, work activity projects, welfare services and the listing, as children's institutions in Schedules to Agreements, of a number of institutions for children with social problems who have been involved with the law. Consultants also served on the various federal-provincial task forces discussed below, and participated in training sessions and studies. Included were training sessions such as those arranged for staff of the Social Development and Rehabilitation Branch of the Nova Scotia Department of Public Welfare, a brief review of the preventive social services program in Alberta, the study of facilities and services for physically and mentally handicapped children in Newfoundland and Labrador and the study of extended care for the aged, chronically ill and disabled in New Brunswick.

The field staff of the Division is responsible for carrying out administrative reviews in the field to determine the shareability of costs and for processing reimbursement claims. Field representatives are also responsible for maintaining liaison with provincial officials by advising them on interpretation of federal legislation and policies and assisting them in the preparation of claims. They also maintain contact with the Audit Services Branch of the Department of Finance which is responsible for an annual financial audit of the program.

At the meeting of federal and provincial Ministers of Welfare in January 1969, agreement was reached on the need for collaboration in activities aimed at making their welfare programs more effective. Several federal-provincial working groups were set up. These included:

- A study group to develop a research program on alienation as it relates to social assistance recipients.

- A task force on a developmental approach to public assistance, to study the feasibility of developing a modified needs test and simplified procedures for determining eligibility with the aim of directing the major efforts of public assistance programs toward the rehabilitation of persons who have a potential for complete or partial self-support.

- A study of elements associated with an improved understanding of cost factors in social assistance, to include the identification of trends in costs, an analysis of caseloads and of factors contributing to increased costs, and the development of more adequate financial and statistical reporting.

Interim reports were presented by the task forces at the meeting of the Ministers of Welfare held in Victoria in October, 1969.

The Task Force on Alienation recommended further study on the inclusion of welfare recipients in decision-making processes relating to welfare policies, the formation of responsible organizations of welfare recipients and their inclusion in the administration of policy through consultation, and how best to effect reform in the treatment of welfare recipients by administrators, to reduce gaps in understanding and overcome frustration.

In its interim report the Task Force on a Developmental Approach to Public Assistance presented a brief analysis of the present status of public assistance programs; suggested a number of ways in which assistance programs could be improved and outlined an alternative to the present approach to such programs. The Ministers of Welfare expressed particular interest in having further work done in three areas:

- preparation of indicators or guidelines to be used as a basis for assessing the adequacy of assistance rates,

- development of ways of simplifying determination of eligibility for assistance,

- investigation of means of securing employment opportunities for assistance recipients.

In view of the expressed interest of the Ministers, the Task Force concentrated its further efforts in these areas. Terms of reference to provide a basis for exploring them were agreed to at a meeting of Deputy Ministers of Welfare held in December 1969. In each case, they called for an exploration of existing knowledge and practice, an assessment of the problems and implications inherent in adopting various alternatives and the development of specific proposals or models that could be used as a basis for bringing about change.

The interim report of the Task Force on Costs of Welfare Programs urged provincial welfare departments to allocate more funds to program administration with emphasis on research and planning activities. This

Task Force was requested to continue work in two major areas: exploration of the feasibility of a cost-benefit analysis of various components of welfare programs, and the development of a model statistical reporting system for financial assistance.

The task forces were directed to present further reports in 1970.

A meeting of deputy ministers of welfare was held in Ottawa in December, 1969. Among the items discussed were the interim task force reports, appeal procedures, technical consultation on staff development and training, sharing of the costs of electronic data processing, and the functions of the National Council of Welfare.

An agreement under Part I of the Canada Assistance Plan was signed with the Yukon Territory on December 16, 1969. Negotiations with respect to the signing of an Agreement are under way with the Northwest Territories.

Expenditures for Assistance and Welfare Services

During the year federal contributions to the provinces under the Plan amounted to $293.5 million. In addition Quebec received $156.6 million in the form of tax abatements and cash adjustments under the Established Programs (Interim Arrangements) Act. Total federal costs in respect of the Plan amounted to $450,128,746. Payments by province and program for the fiscal years 1968-69 and 1969-70 are indicated in the tables on pages 17 and 18. The table below indicates the number of persons being assisted under the Plan as at March 31, 1970.

NUMBER OF PERSONS BEING ASSISTED UNDER THE CANADA ASSISTANCE PLAN AS AT MARCH 31, 1970

Province	Child Care	Assistance Recipients	TOTAL
Newfoundland	1,965	83,733	85,698
Prince Edward Island	445	8,959	9,404
Nova Scotia	3,952	47,862	51,814
New Brunswick	3,683	50,660	54,343
Quebec	43,576	433,864	477,440
Ontario	20,097	334,816	354,913
Manitoba	9,087	49,580	58,667
Saskatchewan	3,417	52,161	55,578
Alberta	7,416	76,970	84,386
British Columbia	8,388	105,378	113,766
CANADA	102,026	1,243,983	1,346.009

BY PROGRAM DURING FISCAL YEAR 1969-1970

Province	General Assistance	Homes for Special Care	Health Care	Child Welfare	Welfare Services	Work Activity Part III	TOTAL
	$	$	$	$	$	$	$
Newfoundland	16,534,688	1,343,359	1,261,150	671,017	478,366	-	20,288,580
Prince Edward Island	1,291,675	1,534,099	188,440	191,636	86,673	-	3,292,523
Nova Scotia	9,299,838	3,504,938	256,825	1,121,381	1,062,855	-	15,245,837
New Brunswick	6,678,626	1,814,618	1,493,514	1,009,848	798,686	-	11,795,292
Quebec*	90,400,000	11,900,000	11,000,000	33,800,000	9,500,000	-	156,600,000
Ontario	85,885,625	18,446,497	5,759,586	11,427,592	10,319,361	-	131,838,661
Manitoba	14,498,568	141,979	1,153,335	1,775,732	1,690,798	-	19,260,412
Saskatchewan	10,634,603	2,448,673	998,064	1,010,353	2,123,147	18,574	17,233,414
Alberta	23,783,483	1,174,253	771,262	3,158,174	2,447,704	-	31,334,876
British Columbia	30,975,191	4,168,000	2,027,064	3,087,534	2,828,473	-	43,086,262
Yukon Territory	152,889	-	-	-	-	-	152,889
TOTAL	290,135,186	46,476,416	24,909,240	57,253,267	31,336,063	18,574	450,128,746

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1968-1969

Province	General Assistance	Homes for Special Care	Health Care	Child Welfare	Welfare Services	Work Activity Part III	TOTAL
	$	$	$	$	$	$	$
Newfoundland	17,595,401	1,240,942	1,147,497	678,422	399,546	-	21,061,808
Prince Edward Island	1,016,256	1,197,132	65,527	238,428	31,914	-	2,549,257
Nova Scotia	6,460,174	2,333,053	556,347	843,102	830,040	-	11,022,716
New Brunswick	6,402,468	643,526	1,513,561	869,364	477,069	-	9,905,988
Quebec*	84,125,000	35,935,000	7,000,000	- **	8,000,000	-	135,060,000
Ontario	77,592,004	13,710,009	7,744,535	10,260,500	8,996,612	-	118,303,660
Manitoba	10,082,277	***	1,594,634	1,306,710	998,158	-	13,981,779
Saskatchewan	9,624,304	1,915,917	1,320,481	993,622	248,396	26,881	14,129,601
Alberta	20,472,298	1,127,073	2,439,724	2,875,853	1,719,958	-	28,634,906
British Columbia	27,579,771	3,314,241	2,131,914	3,351,238	838,724	-	37,215,888
TOTAL	260,949,953	61,416,893	25,514,220	21,417,239	22,540,417	26,881	391,865,603

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

** Included in Homes for Special Care

During the year, contributions were also made under the four other shared-cost programs administered by the Division: old age assistance, blind and disabled persons allowances and unemployment assistance. Expenditures for these programs for the fiscal years 1968-69 and 1969-70 are shown below. The decrease in payments is attributed to larger portions of the groups covered coming under the provisions of the Canada Assistance Plan, and the reduction of the age of eligibility under the Old Age Security Act to 65 years.

Program	Expenditure	
	1968-69(1) ($ million)	1969-70(2) ($ million)
Old Age Assistance	7.0	1.5
Blind Persons Allowances	3.6	3.3
Disabled Persons Allowances	14.3	11.9
Unemployment Assistance	16.7	14.6
TOTAL	$41.6 (million)	$31.3 (million)

(1) Includes amounts received by Quebec under the Established Programs (Interim Arrangements) Act on behalf of these four programs: $3.6 million for old age assistance, $1.5 million for blind persons allowances, $8.0 million for disabled persons allowances, and $15.7 million for unemployment assistance.

(2) Includes amounts received by Quebec under the Established Programs (Interim Arrangements) Act on behalf of these four programs: $0.8 million for old age assistance, $1.4 million for blind persons allowances, $7.5 million for disabled persons allowances and $13.9 million for unemployment assistance.

APPENDIX

PROVINCIAL PROGRAMS SUPPORTED DURING 1969-70 UNDER THE CANADA ASSISTANCE PLAN

As described in the body of this report, the federal government contributes toward the costs of assistance and health and welfare services provided by the provinces to persons who require them.

This appendix outlines the provincial programs through which this help was provided during the fiscal year 1969-70, and includes a résumé of significant developments in the programs during the year. The references are to programs in effect during 1969-70.

NEWFOUNDLAND

General Assistance

General Assistance is provided under the Social Assistance Act to unemployed persons, and to persons such as needy mothers and incapacitated persons who require assistance on a long-term basis. Benefits are determined on the basis of budgetary allowances, set by regulation, to cover food, clothing, personal care, fuel and rent or, in the case of a person living in his own home, household maintenance and utilities. Assistance may also be granted to cover needs such as the repair or renovation of homes, transportation for needy persons who are sick, and for burials. The program is administered by the Department of Public Welfare through its district offices.

Health Care Services

Health care services for persons in need, other than those services provided through medical care and hospital insurance programs, are provided by the provincial Department of Health with costs shared under the Canada Assistance Plan. Included are fees for nursing care, costs of drugs, and air ambulance services. Dental, optical, and prosthetic services may be provided, under prescribed conditions, as may transportation to and from medical centres.

Institutional Care

Needy persons requiring institutional care are assisted through the social assistance program in meeting the costs of care in nursing homes,

homes for the aged operated under religious auspices, and in proprietary boarding homes licensed by the Department of Public Welfare. In addition, a 220-bed institution, Hoyle's Home, is operated by the provincial Department of Public Welfare.

During the year, the maximum rates payable varied from $75 per month for ambulatory residents of boarding homes to $240 per month for bedridden persons in approved institutions. Fifty homes for adults containing over 1,100 domiciliary and nursing beds, were listed as homes for special care. A comforts allowance of $15 per month is paid to needy residents of long-stay homes, hospitals and sanatoria.

Child Care

Federal contributions are made toward the cost of maintaining children placed in foster and group homes under the authority of the Child Welfare Act. This program is administered by the Child Welfare Division of the Department of Public Welfare through its district offices. Foster home rates vary with the age of the child in care.

Child welfare institutions covered for cost sharing include the Children's Home in St. John's, which provides care for disabled children, the Boys' Home and Training School (Pleasantville and Whitbourne) and the Girls' Home and Training School which care for over 100 juveniles, and four orphanages caring for about 300 children.

Welfare Services

Contributions under the Canada Assistance Plan are being made for new costs of welfare services provided through the provincial Department of Public Welfare. These costs include administering the social assistance program and providing associated welfare services, as well as providing child care, protection and adoption services.

Significant Developments during 1969-70

An amendment to the Social Assistance Act, which came into force on August 5, 1969, abolished the Social Assistance Board and vested responsibility for administration in the Director of Social Assistance. Provision was also made for the appointment, by the Lieutenant Governor-in-Council, of up to five regional administrators of social assistance.

The Social Assistance Act was amended to enable the Director of Social Assistance to decide that, in certain cases of application for assistance from unmarried mothers, no effort should be made to obtain support from the putative father.

The Child Welfare Act was amended to enable the Director of Child Welfare to retain a child in care until he reaches the age of 21 years. Formerly, the Director could extend custody from 16 to 18 years of age and the Minister to 21 years.

PRINCE EDWARD ISLAND

General Assistance

General assistance is provided under the General Welfare Assistance Act. Benefits are determined on the basis of budgetary allowances for requirements which include food, clothing, shelter, household and personal items, fuel, and utilities. Provision is also made for assistance to cover items of special need, including housekeeping services and materials or services required in rehabilitation. The program is administered by the provincial Department of Welfare, two municipalities, and two welfare bureaus in the City of Charlottetown.

Health Care Services

The General Welfare Assistance Act provides for the granting of aid to cover the costs of health care services. Such services may include necessary medical and surgical services, nursing, dental care, optical care, essential prescribed drugs and appliances.

Institutional Care

Persons in need in nursing homes, homes for the aged, hostels and other residential welfare institutions are assisted to meet the costs of care under the general welfare assistance program. Persons in care are also entitled to a comforts allowance of up to $10 per month.

During the year, ten institutions for adults having a total of 960 domiciliary and nursing beds were listed as homes for special care under the Plan. Provincially operated institutions account for about 780 of these beds. Included among the institutions is a half-way house for the treatment of alcoholics.

Child Care

Provincial payments are made for the maintenance of children who are placed in foster homes under the authority of the Children's Protection Act. Costs covered include those for neglected children permanently or temporarily committed by the Courts to the care and custody of the child welfare authorities.

Two child care institutions having a total of 85 beds are listed as homes for special care.

The child care program is administered by the Director of Child Welfare, Department of Welfare.

Welfare Services

Federal contributions are being made toward new costs of welfare services provided by the provincial Department of Welfare and two welfare bureaus, including costs of administering the general welfare assistance program and of providing child care, protection and adoption services.

Significant Developments during 1969-70

Through an amendment to the General Welfare Assistance Regulations the maximum rental allowance for urban areas was incresed from $60 to $80 per month. The rural rate remains $40 per month.

A new section to the Children's Protection Act permits the Director of Child Welfare to place children for adoption in homes outside the province Legally recognized child welfare authorities in other jurisdictions may place children in adoption homes in Prince Edward Island. Before such an adoption may be completed, wardship rights must be passed to a legally recognized child welfare authority in the province.

A new Adoption Act became operative effective October 1969 replacing the existing act which was enacted in 1951.

NOVA SCOTIA

General Assistance

General assistance is provided under Parts I, IA, and II of the Social Assistance Act.

Provincial assistance is provided under Parts I and IA to needy mothers with dependent children, disabled persons, foster mothers and unemployable fathers with dependent children. Assistance is paid on the basis of a needs test with maximum benefits for disabled persons amounting to $100 per month. Benefits for needy families, calculated at one hundred per cent of assessed budgetary requirements, are paid up to a maximum of $175 per month. Needy women 60 to 65 years of

age may receive up to $75 per month. The maximum amount payable to persons 65 years of age and over who do not qualify for old age security is $100 per month.

Municipal assistance is provided under Part II of the Act to persons not covered by the provincial assistance program or to supplement provincial assistance. Under this Part, the province sets budget standards and also provides grants to municipalities for the payment of assistance on the basis of need. Provincial contributions amount to seventy-five per cent or more of costs, depending on the fiscal capability of the municipality. Assistance is administered through municipal welfare departments and, in several areas, by the provincial Department of Public Welfare or a local children's aid society on behalf of the municipality.

Health Care

Persons in need are covered by medical care and hospital insurance programs. Additional assistance may be provided, with sharing under the Canada Assistance Plan, to cover the costs of optical and dental care and drugs.

Institutional Care

Needy persons requiring institutional care are assisted by municipalities under Part II of the Social Assistance Act. Care is provided in sixteen municipal homes for the aged, four municipal homes for the disabled (which care mainly for mentally retarded adults), and in a number of proprietary homes for the aged and nursing homes licensed by the Department of Public Welfare under the Boarding Homes Act or by the Department of Health under the Nursing Homes Act.

During the year, 100 homes providing nursing or domiciliary care for adults and having a total of about 3,400 beds were listed as homes for special care under the federal cost-sharing Agreement. Rates paid for care in each home are determined according to the types and levels of care provided and are approved by the Department of Public Welfare. Residents of homes are allowed a comforts allowance of $15 per month. Municipalities may also pay a comforts allowance to needy patients of mental and tuberculosis hospitals.

Child Care

Federal contributions are being made toward the costs of maintaining children placed in foster homes and child care institutions under the

authority of the Child Welfare Act. Supervision of such children is the responsibility of the Family and Child Welfare Division of the provincial Department of Public Welfare, nine children's aid societies and three family and children's service agencies. Payments for maintenance are based on monthly rates set by a committee established under the Child Welfare Act.

Provincially owned and operated child care institutions for which costs are shared, include the Nova Scotia Training School for Retarded Children at Truro, and five homes for retarded children. These have a bed capacity of over 500. Also covered are the Nova Scotia Boys' and Girls' Schools which care for about 185 juveniles; St. Euphrasia's Training School, under religious auspices, provides another 60 beds for the care of juveniles. Some ten child caring institutions operated by voluntary or religious organizations with a bed capacity of about 320 are also listed under the Plan.

Welfare Services

Federal contributions toward new costs of welfare services are being made for three kinds of agencies in Nova Scotia: the provincial Department of Public Welfare, including headquarters administration and thirteen regional and district offices; eighteen organized municipal departments of welfare that are responsible for the administration of assistance and the provision of related welfare services, and nine children's aid societies and three family and children's service agencies in which the province pays the cost of supervising children in care and contributes, together with the municipalities, to the costs of protection services, services to unmarried mothers, and adoption services.

Significant Developments during 1969-70

The Social Assistance Act was amended to include a new Part, IA, under which assistance may be granted to persons who had been receiving allowances under the Disabled Persons Allowances Act. Receipt of applications under the Disabled Persons Allowances Act was discontinued and recipients transferred to Part IA of the Social Assistance Act if eligible for higher or comparable benefits. Under Part IA, coverage has been extended to unemployable fathers with dependent children.

Provincial social assistance regulations were amended effective July 1, 1969, to provide for the granting of assistance to needy unemployable women 60 to 65 years of age who are unmarried, widowed, deserted or divorced. Eligible women may receive up to $75 per month.

The maximum monthly allowance for families receiving provincial social assistance has been increased from $150 to $175 per month. The provision that only 75 per cent of the budget deficit be paid has been abolished and 100 per cent payments introduced.

The Diabetic Assistance Regulation of August 15, 1969, provides for the granting of assistance to diabetics, on a needs test basis, for the purchase of drugs and test materials. This program is now administered by the Department of Welfare. It was previously administered by the Department of Health on a means test basis.

Through an amendment to the Child Welfare Act, the annual contribution by the province to a Children's Aid Society for children placed in an institution was increased from $598 to $963 for each child. The new rate was effective April 1, 1969.

During the year, the province invoked Section 21 of the Juvenile Delinquents Act. This provides that delinquent children are to be dealt with under provincial child welfare programs rather than under correctional programs.

Regulations were made to implement the provincial appeal system and became effective on March 1, 1970.

NEW BRUNSWICK

General Assistance

General assistance for persons in need is provided under the Social Welfare Act which came into effect on January 1, 1967. Benefits are determined on the basis of budgetary allowances which include set amounts for food, clothing, household and personal items, and maximum amounts for shelter, fuel and utilities. Provision is also made for items of special need. The program is administered by the province through fifteen district offices. During the year these were grouped into five health and welfare regions.

Health Care Services

The services of physicians, surgeons, obstetricians and other specialists are provided under the Social Welfare Act to recipients of assistance. Medical cards are issued to recipients, and services are made available through an agreement between the province and the New Brunswick Medical Society. Additional provision is made for other health needs, including diagnostic services, prescribed drugs, dental care and vision services.

Institutional Care

Needy persons requiring institutional care are assisted under the Social Welfare Act to meet the costs of care in homes for the aged, nursing homes and other types of residential welfare institutions. These homes are licensed under the Health Act. Rates are established in each home in accordance with the level of care provided and are approved by the provincial Director of Welfare. Residents of these homes retain $15 per month as a comforts allowance.

During the year, 92 institutions providing domiciliary or nursing care for adults and having a total of about 2,425 beds were listed as homes for special care under the federal cost-sharing agreement.

Child Care

Federal contributions are being made toward the cost of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Act. Since January 1, 1967, the province has been responsible for the maintenance of all children in care. Daily board rates are based on the age of the child, with additional amounts being paid for clothing, health services, education and other requirements.

Child care institutions accepted under the Plan include the New Brunswick Protestant Orphans' Home, Saint John, with 170 beds and four other institutions with over 350 beds.

Welfare Services

Contributions are made under the Canada Assistance Plan for new costs involved in administering assistance under the Social Welfare Act, providing related welfare services, and extending child care and protection services. All services are provided by the province through its district offices.

Significant Developments during 1969-70

Through a regulation under the Social Welfare Act, effective February 19, 1970, provision was made for an appeal procedure for applicants or recipients of general assistance. An applicant or recipient may initiate an appeal to the Appeals Board by serving a Notice of Appeal to the Chairman within ten days after the date on which he receives the decision of the Director of Welfare Services. The Appeals Board, which

is appointed by the Minister of Health and Welfare, is composed of a Chairman, Vice-Chairman, and twelve to twenty-five members. No one is eligible for appointment to the Board if he has been employed in the civil service of the province within six months of such appointment.

A Dental Advisory Committee was established by a regulation under the Social Welfare Act effective May 12, 1969. The Committee is composed of two persons from the Department of Health and Welfare and three persons from a list proposed by the Dental Society. Its purpose is to review expenditures, advise on changes and suggest means to improve the dental program and procedures.

QUEBEC(1)

General Assistance

General assistance is provided under the Public Charities Act and Regulations. This program includes assistance to the unemployed, assistance to widows and spinsters aged 60-65 years, and supplementation to old age security pensioners and to recipients of categorical allowances. Assistance to needy mothers is shared under the federal Unemployment Assistance Act, and administered under the Quebec Needy Mothers Allowances Act.

Assistance is determined in accordance with an extensive list of basic needs, with variable rates for food, clothing and fuel, and fixed rates for personal and household needs. Actual costs are paid for shelter and utilities. Assistance levels are based upon factors such as size of family and locality, thereby taking into account higher costs in larger centres such as Montreal and Quebec City.

The assistance program is administered by the Social Assistance Directorate through regional offices of the Department of Family and Social Welfare, except for the City of Montreal.

Health Care Services

Medical care is provided to recipients of most classes of assistance. The program is authorized by the Medical Assistance Act and operates under an agreement between the province and medical associations.

1) Federal financial support of the programs covered under the Canada Assistance Plan Agreement with Quebec is provided under the terms of the Plan and the Established Programs (Interim Arrangements) Act.

Assistance recipients are issued with medical assistance cards which entitle the holder and dependents to physicians' services, including medical and surgical services and certain diagnostic services. Drugs and other required services are provided as items of assistance under the Public Charities Act.

Institutional Care

Needy persons requiring institutional care are maintained in homes for the aged, nursing homes and other types of residential care institutions which are operated by religious and charitable organizations or are under private ownership. Licensing and supervision is carried out by the Department of Family and Social Welfare and, in a small residual program, by the Department of Health. Rates for the maintenance of needy residents are established on the basis of the level of care provided by the home and that required by the resident.

At the end of the year about 410 institutions providing domiciliary or nursing care to adults and having a total of almost 18,000 beds were listed as homes for special care under the federal cost-sharing agreement. Residents of these homes retain $22 per month as a comforts allowance. This amount is also paid to needy patients in hospitals and sanatoria.

Child Care

Federal contributions are made toward the costs of care and maintenance of children in child welfare institutions or in the care of social agencies under the terms of the Public Charities Act. Full financial responsibility for child welfare costs has been borne by the province since April 1, 1966. Child care may be provided in a variety of children's institutions, foster homes, or private day nurseries. The range of services spans the field from general supervision and care of normal children to the training of retarded children and intensive treatment and protection for children with psychological problems.

During the year, 87 child care institutions with almost 11,000 beds were listed as homes for special care. Fifty-two of these are operated under voluntary auspices. They have a total of about 8,500 beds.

Welfare Services

Federal contributions are being made for new costs of welfare services provided primarily under the Public Charities Act, the Social Allowances Commission Act and the Adoptions Act, by the Department of

Family and Social Welfare, by the City of Montreal and by voluntary social welfare agencies.

Significant Developments during 1969-70

The major development in the province during the year was the enactment of the Social Aid Act which received Royal Assent on December 12, 1969, to come into force on proclamation. The new Act will consolidate mothers allowances, disabled and blind persons allowances, old age assistance, and long and short-term assistance granted under the Public Charities Act into a general assistance program.

The new Act established two classes of social aid; ordinary which covers basic requirements and special which covers all other needs except health care services provided through the Medical Assistance Act. Assistance, to be granted on a needs-test basis, may be paid in the form of cash, kind, services, loans and guarantees for loans.

The Act provides for a formal administrative review procedure and a formal appeal procedure for applicants and recipients who are dissatisfied. Initially an appeal is made to the Minister or a person appointed by him. If satisfaction is not obtained, the appeal may be carried to the Social Aid Appeal Board, a six-member body to be appointed by the Lieutenant Governor-in-Council, whose decision is final.

ONTARIO

General Assistance

During the year there were two programs of a general assistance nature in effect in Ontario.

Persons and families in need who require maintenance on a long-erm basis are granted an allowance under the Family Benefits Act. The Act provides for aid to persons 65 years of age or older, who are ot in receipt of an allowance under the Old Age Security Act; disabled or lind persons 18 years of age or over; mothers with dependent children f the father is absent or unemployed; women 60 to 65 years of age who re single, widowed, or whose husbands are absent; dependent fathers ith dependent children and foster mothers raising children other than heir own.

Benefits are determined on the basis of pre-added budgets intended to cover food, clothing, household maintenance and sundries; amounts provided vary according to family size and composition, and additional provisions are made for fuel and shelter. Free medical and hospital insurance are provided. This program is administered by the province through its regional offices.

Persons not able to qualify under the Family Benefits Act may be assisted under the municipally administered General Welfare Assistance Act. Municipal assistance is also provided on the basis of need, using pre-added budgets and maximum shelter and fuel allowances set by the province. Under this program, provision is made for granting additional assistance to recipients of old age security, categorical allowances, family benefits and rehabilitation allowances. Special assistance may be provided to or on behalf of persons in need to cover items such as drugs, prosthetic appliances and costs of funerals and burials. Municipalities are reimbursed by the province for 80 per cent of the cost of providing assistance for basic requirements and additional aid and 50 per cent of the cost of items of special assistance.

Health Care Services

Recipients of assistance receive medical and hospital coverage under the universal hospital insurance and medical care programs. Dental services may be provided by the province or a municipality under the Family Benefits Act or the General Welfare Assistance Act. Other health care services are provided on a supplementary basis by municipalities under the authority of the General Welfare Assistance Act.

Institutional Care

Institutional care for adults is provided through a number of programs in the province:

1. Elderly persons are cared for in over 75 homes operated by cities, counties, and districts under the Homes for the Aged and Rest Homes Act. These provide upwards of 14,400 beds for the care of the aged. The province reimburses municipalities for 70 per cent of net costs of providing care for needy persons in such homes.

2. Aged, infirm and other persons are also cared for in over 110 institutions operated by voluntary and religious organizations under the Charitable Institutions Act. These

provide more than 8,400 beds for the residential care of such persons. The province, during the year under review, reimbursed such homes for 80 per cent of their net costs, based on the average daily costs of care and maintenance, but not to exceed $8.00 per day.

3. Assistance to cover the costs of care for needy residents in proprietary nursing homes is provided by the province through the Family Benefits Act, for those qualifying under the Act, up to a maximum of $10.50 per day. For other needy persons the municipalities provide nursing home care under the General Welfare Assistance Act with provincial reimbursement amounting to 80 per cent of costs up to a maximum municipal contribution of $10.50 per day for nursing care in a licensed nursing home. These nursing homes number about 450 and provide over 14,000 beds, mainly for the care of aged persons.

4. Two hundred and twenty-five residential homes for special care with a total capacity of approximately 1,900 beds, are licensed to care for ambulatory persons discharged from mental hospitals. The cost of care for needy residents of such homes is paid by the province under the Family Benefits Act. The maximum cost shared in a nursing home is $10.50 per day and, when the resident does not require nursing care, $35.00 per week.

Residents of the above homes retain $15 per month as a comforts allowance.

Child Care

Federal contributions are made toward the costs of maintaining children placed in foster homes and in child care institutions under the authority of the Child Welfare Act. The major portion of costs is for children placed by the more than fifty children's aid societies in the province. Maintenance costs for these children are shared 60 per cent by the province and 40 per cent by the municipalities. Costs for the care and maintenance of children of unmarried parents are borne entirely by the province.

During the year, about 200 child-caring institutions in Ontario with a capacity of some 2,365 beds were listed as homes for special care under the federal cost-sharing agreement. These include receiving and group homes operated by children's aid societies and institutions for the emotionally disturbed.

Welfare Services

Federal contributions are made toward new costs of welfare services provided by three kinds of agencies in the province, namely, the administration of assistance and the provision of welfare services through the provincial Department of Social And Family Services; the cost of administering general welfare assistance and other programs through about seventy municipal welfare departments; and the cost of providing child welfare services, including supervision of children in care, adoption services, protection services and services to unmarried mothers, through children's aid societies in the province.

Significant Developments during 1969-70

A Regulation under the Family Benefits Act, made in May 1969, authorized a comforts allowance of $15 per month for patients in hospitals or chronic care homes approved under the Ontario Hospital Services Commission Act as health facilities for the provision of services to chronically ill patients.

New Regulations under the General Welfare Assistance Act and the Family Benefits Act exempt municipal tax or rent rebates under the Residential property Tax Reduction Act 1968 from the calculation of income and such rebates are not to be reflected as a reduction in shelter costs in the budget deficit process.

The Minister of Social and Family Services may make special grants to District Welfare Administration Boards where one of the municipalities by annexation or amalgamation withdraws from the Board, resulting in an unusually large increase in costs for remaining members.

Under an amendment to the Day Nurseries Act, a day nursery established by an Indian band does not require prior ministerial approval.

A 1969 amendment to the Homemakers and Nurses Services Act provides for a provincial subsidy to Indian bands purchasing services for needy band members on a fee for service basis. A band is eligible for the subsidy on the same basis as a municipality.

The Child Welfare Act was amended to permit either a parent or a Children's Aid Society to apply for the termination of Crown wardship. Previously parents did not have this right. When a child in need of protection has been made a Crown ward and has been placed for adoption, a request for termination of wardship will not be heard. In such a case

wardship cannot be terminated except by an adoption order. In any termination of wardship hearings, the judge may have regard to the wishes of the child.

With respect to protection cases, a note has been added to the form, Notice of Hearing, explaining that court hearings are closed but that parents may attend. Their rights, including representation by counsel, are listed. The note explains the various courses of action and the orders a court may make with respect to protection cases, and sets out parents' rights to appeal and the time limits involved.

MANITOBA

General Assistance

General assistance is provided through two programs, namely, provincial social allowances and municipal assistance.

Social allowances are provided to mothers in need, the physically and mentally disabled, persons 65 years of age or over, unemployed and unemployable residents of unorganized territories and on behalf of neglected children. Benefits are determined on the basis of budgetary amounts for food, clothing, fuel, utilities, household and personal needs, and shelter. The social allowance program is administered directly by the province through a network of eleven regional offices.

Assistance is provided by municipalities on a short-term basis to persons not covered by the provincial social allowance program. This assistance is also provided on a needs-test basis using budget scales set by each municipality. The province reimburses municipalities for expenditures for assistance under a formula set out in the Social Allowances Act.

Health Care Services

Recipients of provincial social allowances received their medical and hospital care under the Medical Care Act and the hospital insurance program.

Additional health services including dental and optical care and prescribed drugs may be provided as required to recipients of provincial assistance. Other health services include home nursing and homemaker services, prosthetic appliances, physiotherapy, special rent or diet allowances, and transportation to obtain health care.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in paying for their care through the social allowances program. In most instances, the care is provided in voluntary and proprietary homes located throughout the province.

The institutional care program is administered primarily by Care Services, a Section of the Department of Health and Social Services which is responsible for the development, licensing and inspection of homes and for the placement of individuals requiring special care.

During the year, ninety domiciliary and nursing homes for adults with over 5,000 beds were listed as homes for special care under the Plan. Payments are based upon rates that are set for each of the homes in accordance with the level of care provided.

With provincial approval, an institution may provide a comforts allowance. The usual amount of the allowance is $12 per month.

Child Care

Federal contributions are made toward the cost of caring for children that are placed in foster homes, group homes, and child care institutions under the authority of the Child Welfare Act. Payments during the year included costs for children placed in care by the province, by the four children's aid societies in the province, and by the Jewish Child and Family Service. Payments are based upon rates determined by an advisory committee established under the Child Welfare Act.

During the year some 31 child caring institutions with a capacity of 375 beds were listed under the Plan. While most of these were group foster homes operated by children's aid societies, eight were institutions providing specialized care, such as that required by emotionally disturbed children, with a capacity of about 200 beds.

Welfare Services

Federal contributions are made toward the cost of new welfare services provided by the provincial Department of Health and Social Services which administers social allowances and provides other welfare services through a network of regional offices, by municipal departments of welfare which are responsible for the administration of

assistance and the provision of associated welfare services, and by four children's aid societies providing child care, protection and adoption services. Federal funds are also provided for fifteen voluntary welfare service agencies providing day care, counselling and other welfare services.

Significant Developments during 1969-70

The Social Allowances Act was amended on September 30, 1969, and the Social Allowances Regulations on October 10, 1969. All references to Indians were removed from the Social Allowances Act indicating that Indians are considered residents of the province in the same way as other persons.

Regulations gazetted October 18, 1969, increased monthly food allowances by 10 per cent. Maximum monthly amounts for clothing were also increased. Shelter allowances were increased by $20 a month to a maximum of $45 for single persons living alone, $60 for two adults, and a maximum of $75 for families with children. Where the actual rent paid exceeds the maximum, additional amounts may be granted. Allowances for utilities and fuel have been extended and may include instalment payments on items such as furnaces and hot water tanks. The amount allowed for fuel is the estimated monthly cost based on actual expenditures for the previous twelve months or estimated costs for the next twelve months if circumstances have changed.

An allowance of $12 per month, an increase of $2, may be paid to an adult for personal needs. This may be increased by $5 in the case of blind persons. The new allowance for household supplies is set at $3 per household unit with an additional $1 for each person in excess of one.

Board rates for needy persons and needy families were increased over a range of $10 to $20 per month depending on family size, and services available.

SASKATCHEWAN

General Assistance

General assistance is provided under the Saskatchewan Assistance Plan through which assistance may be granted to any person in need.

Benefits for long-term recipients are determined on the basis of budgetary allowances for basic maintenance, which include food, clothing, shelter, fuel, utilities and household and personal needs. Benefits for short-term assistance are based upon a pre-added budget covering all items except shelter for which actual expenditures are met. Provision is also made for granting assistance to cover a variety of items of special need, including household equipment, housekeeping allowances, and items incidental to education or employment.

The Saskatchewan Assistance Plan is administered by the provincial Department of Welfare through its regional offices, except in the municipalities of Prince Albert and Moose Jaw where assistance is granted through municipal social service departments.

Health Care Services

Health care services for recipients of assistance are provided under the medical care and hospital insurance programs. Additional benefits, such as optical and dental services (including eye glasses and dentures), physiotherapy, chiropody, drugs and appliances are provided when required through the Medical Services Division of the Department of Health.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes, homes for unmarried mothers and other types of residential welfare institutions for adults are assisted in meeting the costs of such care through the Saskatchewan Assistance Plan. These homes are licensed and inspected by the Department of Welfare under the Housing and Special Care Homes Act. A large proportion of such homes have been constructed in recent years with the assistance of long-term, low-interest loans under the National Housing Act and are operated by voluntary groups or municipal corporations.

During the year, there were almost 100 such institutions containing a total of 5,000 nursing and domiciliary beds which were listed as homes for special care under the federal cost-sharing agreement. Maximum rates payable were $207 per month for supervisory and limited personal care and $287 per month for nursing care. In cases of hardship the Director of Public Assistance may waive the maximum on rates. Residents of these institutions retain a comforts allowance of $10.00 per month.

Child Care

The child care program is administered directly by the provincial Department of Welfare through its regional offices. Payments are made for maintenance, health care and other needs of children who have been placed in foster homes, group homes or child care institutions under the authority of the Child Welfare Act. Such care is provided to children who are found by the courts to be neglected and to children voluntarily committed to the Crown by their parents.

During the year ten child caring institutions with a capacity of over 175 beds were listed as homes for special care under the federal cost-sharing agreement. These institutions included receiving homes, group foster homes, hostels and treatment centres for children with behavior problems.

Welfare Services

Federal contributions are made toward the new costs of welfare services provided by the provincial Department of Welfare and the Social Service Departments of the cities of Moose Jaw and Prince Albert. In the provincial department, contributions go toward the costs of administering the Saskatchewan Assistance Plan, providing associated welfare services through regional offices and sub-offices, and the cost of providing child welfare services, including supervision of children in care, protection services, and adoptions.

Significant Developments during 1969-70

The Saskatchewan Assistance Plan was amended on several points. A provision has been inserted in the Plan to ensure that disabled persons 18 years of age or over who are living at home have the right to apply for assistance in their own right.

Maintenance rates for needy persons in public or private homes for special care were increased from $194 to $207 per month for persons requiring supervision and limited personal care and from $274 to $287 for persons requiring extensive personal and nursing care.

Provisions for the disposal of assets were changed. The discount rate or amount of capital lost in disposal of assets has been lowered from up to 35 per cent to not more than 20 per cent for both liquid and real property assets, thereby giving some protection to persons in need.

The exemption for casual or part-time earnings is now the greater of one-half of the net casual or part-time earnings of the recipient, his spouse or dependent children under 16 years of age who do not attend school provided that it does not exceed 25 per cent of basic budgetary requirements (75 per cent if the recipient is a partially employable person) or $10 per month each for the recipient and first dependant and $5 for each additional dependant. Transportation costs to and from work may be included in the recipient's budgetary requirements.

A person who is dissatisfied with an adjustment in assistance rates as proposed by a local unit now has 15 clear days (formerly 10 days) in which to apply for a hearing before the local review committee. This additional time gives the individual more time to exercise his legal rights and to protect his interests.

ALBERTA

General Assistance

General assistance is provided through the provincial social allowance program and through the municipal assistance program.

Social allowances are granted to persons in need because of age, physical or mental incapacity; to parents with dependent children; to persons undertaking rehabilitation, and on behalf of children in the home of a guardian.

Benefits are based upon rate schedules for food and clothing which are adjusted annually to reflect changes in the cost of living. Allowances for shelter are paid up to levels accepted as the standard for health and decency in the community in which the recipient lives. The social allowance program is administered directly by the provincial Department of Social Development through a network of regional offices.

Municipal assistance is provided on a short-term basis to persons, usually unemployed employables, resident in the community who do not qualify under the provincial social allowance program. Eligibility is determined through an assessment of need using budgetary standards which are set at the discretion of municipalities. The province reimburses municipalities for 80 per cent of their expenditures for assistance.

Health Care Services

Recipients receive medical and hospital coverage under the medical care and hospital insurance programs. Other health services such as dental, chiropractic and optical care are provided through a Treatment Services Card and prescription drugs are authorized through a stub attached to the monthly cheque. Health care services for voucher recipients are provided on an individual basis.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in meeting the cost of such care through the social allowances program. Care may be provided in provincial, municipal or voluntary homes which are licensed and supervised under the Welfare Homes Act by the Homes and Institutions Branch of the Department of Social Development or in proprietary nursing homes licensed and supervised by the Department of Health under the Nursing Homes Act. A network of senior citizens lodges, built by the province and operated by the municipalities, provides domiciliary care.

During the year over 145 homes with 9,000 domiciliary and nursing beds for adults were listed as homes for special care under the federal cost-sharing agreement. There were over forty-five contract nursing homes and seventy-five senior citizens lodges. Residents of these homes retain a comforts allowance of $15 per month.

Child Care

Child welfare services in Alberta are administered by the province under the Child Welfare Act. Maintenance costs are assumed by the province. Per diem rates for care in a foster home vary with the age of the child. Costs for clothing, health care and school supplies are also met by the province.

During the year, some 30 child caring institutions with a capacity of about 900 beds were listed as homes for special care under the federal cost-sharing agreement.

Welfare Services

During the year three types of welfare services were included as sharable costs under the Canada Assistance Plan Agreement: direct services provided through the regional offices of the provincial Department of Social Development, including the administration of the social allowance and social assistance programs and the provision of child care and family services; the administration of assistance through

municipal departments of welfare in ten major municipalities; the provision of welfare services by voluntary agencies primarily under the Preventive Social Services program. Preventive social services include day care, homemaker services, counselling, and supportive services for the aged.

Significant Developments during 1969-70

The Department of Social Development Act replaced the Department of Public Welfare Act on May 7, 1969. An amendment to the Preventive Social Services Act authorized the Minister of Social Development to establish and operate preventive social service programs and projects. Local governments may initiate and operate preventive service programs and the provincial government will continue to reimburse them for 80 per cent of the cost of approved programs and the provision of consultative and advisory services.

Food and clothing allowances for recipients of social allowances were adjusted upwards in 1969. Food rates for adults were increased by about $2.00 per month. Increases for children were less. A child under one year of age receives a maximum food allowance of $13.80 per month while a single adult male living alone receives $36.10 per month. Clothing allowances range from $8.10 per month for men to $8.50 for women. Children's rates range from $4.90 to $11.50 per month.

All recipients of social allowances and of pensions previously covered by the Alberta Health Plan have been registered under the Alberta Health Care Insurance Plan.

BRITISH COLUMBIA

General Assistance

Two general assistance programs are operated in the province: social allowances, and supplementary social allowances.

Social allowances are paid to any needy person requiring assistance on a short or long-term basis, except persons eligible for blind or disabled persons allowances which the province continued to grant during the year. Budgets are determined on the basis of rate scales set by the province covering food, clothing, household operation and sundry expenses and shelter costs. The program is administered through regional and district offices of the Department of Social Welfare, except for a number of major municipalities where administration is undertaken through municipal departments of welfare.

Supplementary social allowances may be granted to recipients of old age security, and blind and disabled persons allowances and are paid on the basis of need up to established income ceilings. The program is administered through the district offices of the Department of Social Welfare or municipal welfare offices.

Health Care Services

Hospital and medical care is provided to recipients under medical care and hospital insurance programs. Other services provided include payment for prescribed drugs on the drug benefit list and basic dental care.

Institutional Care

Needy persons who require care in homes for special care are assisted in meeting the costs of this care through the social allowances program. Care may be provided in boarding homes licensed by the Welfare Institutions Licensing Board and in "nursing homes" licensed under the Private Hospitals Act. During the year, 415 boarding homes with 7,300 beds and 75 nursing homes with 3,200 beds were listed as homes for special care for federal cost-sharing purposes. Maximum assistance rates paid were $120 per month for boarding home care and $245 per month for nursing home care. Residents may retain $16 per month as a comforts allowance.

Child Care

Federal contributions are made toward the cost of care provided to children who have been placed in foster homes, group homes and child care institutions under the authority of the Protection of Children Act. The costs shared include maintenance payments to foster parents, which vary with the age of the child, and clothing allowances, health care services and school supplies. The child care program is administered by Children's Aid Societies in Victoria and Vancouver and through the district offices of the Department of Social Welfare in other parts of the province.

During the year, some 115 child caring institutions with a capacity of 1,150 beds were listed as homes for special care for federal cost-sharing purposes. These included hostels, and receiving homes, group foster homes, treatment centres for delinquents, and centres and hostels for the retarded.

Welfare Services

Federal contributions are made toward new costs of welfare services provided through the provincial Department of Social Welfare, including costs of administering social allowances and supplementary social allowances and providing related child and family welfare services through a regional office structure. Contributions are also made for the costs of administering assistance and providing services through municipal welfare departments and of providing adoption, protection and other child welfare services through the three Children's Aid Societies located in Victoria and Vancouver. There are 13 voluntary agencies providing counselling services, day care, and supportive services.

Significant Developments during 1969-70

The Community Care Facilities Licensing Act repealed the Welfare Institutions Licensing Act and the Provincial Home Act 1969 repealed the Provincial Home Act 1960.

The maximum supplementary social allowance payable to recipients of blind and disabled persons allowances was increased from $30 to $60 per month effective August 1, 1969. For recipients of old age security the budget limit for supplementary social allowances was increased from $139.20 to $141.41 for a single person and from $248.40 to $252.82 for married couples. These increases were effective January 1, 1970, to coincide with the 2 per cent increase in old age security and the guaranteed income supplement.

Extra dietary allowances for recipients of social allowances were set at $10 per month effective September 1, 1969. The former rate was $5 to $10 per month.

Effective September 1969, the earnings exemption for non-dependent children at home was increased to $300 per month plus 50 per cent of the balance. The personal assets exemption of $500 was extended to all social allowances recipients, except transients. The cash surrender value of life insurance is now exempt to $1,000.

The Protection of Children Act was amended on a number of points, effective April 2, 1969. It defines "child care resource" to include a facility established for the care, treatment, training and rehabilitation of children. The Superintendent of Child Welfare or a Children's Aid Society may make arrangements to place children who are committed to care in the home of a parent or guardian or in a child care resource. They may also arrange for the child's discharge. The amended Act

designates Brannan Lake and Willingdon Schools as child care resources and repeals the Training Schools Act. Upon repeal of the Training Schools Act, these schools became child care resources. All children concerned were committed to the care of the Superintendent of Child Welfare or of a Children's Aid Society.

YUKON TERRITORY

General Assistance

General Assistance is provided under the terms of the Social Assistance Ordinance and the Social Assistance Regulations. This legislation is administered by the Director of Social Welfare who may make provision for the granting of assistance and welfare services to any person in need residing in the Territory or to any person in need residing outside the Territory in accordance with an arrangement approved by the Director.

Benefits are determined on the basis of budgetary allowances set by Regulation to cover food, clothing, boarding care, rent, utilities, an allowance for homeowners, and incidental allowances to cover personal care and household maintenance. Assistance for items of special need such as special clothing, telephone, travel, rehabilitation, housekeeping and laundry allowances, and burial expenses may be granted with the approval of the Director of Social Welfare or an officer of the Department of Social Welfare designated by him. Supplementary allowances may be granted on the basis of need to recipients of Old Age Security, Blind Persons Allowances, Disabled Persons Allowances or other statutory allowances.

Health Care Services

The Social Assistance Regulations provide for the granting of aid to cover services which are not provided under the Yukon Hospital Insurance Services Ordinance. Such services may include medical, surgical, obstetrical, optical, dental and nursing services, drugs, dressings and prosthetic appliances.

Institutional Care

Assistance up to a maximum of $450 per month may be paid on behalf of persons in need who require extensive personal or nursing care in a public or private nursing home or home for special care.

If the recipient of assistance is in receipt of an allowance or pension, he is required to contribute to the cost of his care in an amount considered reasonable by the Director of Social Welfare. Residents of homes may retain a comforts allowance of up to $20 per month.

Six institutions providing nursing or domiciliary care for adults and having a total of 124 beds have been listed as homes for special care under the federal cost-sharing agreement.

Child Care

Federal contributions are being made toward the costs of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Ordinance. Four children's institutions with a capacity of 59 beds are listed under the federal cost-sharing agreement.

Welfare Services

The Director of Social Welfare may arrange for the provision of welfare services to persons in need or to persons who are likely to become persons in need unless such services are provided.

Federal contributions are being made toward new costs of welfare services provided by the Department of Social Welfare, including costs of administering the general welfare assistance program and of providing child care, protection and adoption services.

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ADA ASSISTANCE PLAN 79- ANNUAL REPORT

Health and Welfare Canada
Santé et Bien-être social Canada

ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1971

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Information Canada
Ottawa, 1972

Cat. No.: H75-8/1971

His Excellency the Right Honourable Roland Michener, P.C., Q.C.,
Governor General and Commander-in-Chief of Canada,

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to your Excellency the Annual Report on the administration of the Canada Assistance Plan for the fiscal year ended March 31, 1971.

Respectfully submitted,



John Munro,
Minister of National Health and Welfare

The Honourable John Munro, P.C., M.P.,
Minister of National Health and Welfare,
Ottawa.

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1971.

Respectfully submitted,

Joseph W. Willard

Joseph W. Willard,
Deputy Minister of National Welfare

ANNUAL REPORT

CANADA ASSISTANCE PLAN

YEAR ENDED MARCH 31, 1971

The Canada Assistance Plan was enacted by Parliament and came into operation during 1966-67. It received Royal Assent on July 15, 1966, with retroactive effect to April 1st of that year. Regulations under Part I, General Assistance and Welfare Services, were adopted by the Governor-in-Council on February 8, 1967.

The Plan is a measure for supporting the integration, broadening and improvement of provincial and municipal public assistance programs and encouraging the extension and development of welfare services. Under it, contributions amounting to fifty per cent of shareable costs are made toward provincial and municipal expenditures for public assistance and welfare services.

All provinces signed Agreements under Part I of the Plan by August, 1967. Agreements under Part III, which covers work activity projects, were signed by nine provinces by March 31, 1971. No Agreements have been signed under Part II of the Plan which covers assistance and welfare services for Indians on reserves and in unorganized territory.

OBJECTIVES AND MAIN FEATURES OF THE PLAN

The Canada Assistance Plan has two primary objectives. These are to support the provision of adequate assistance to persons in need and to encourage the development and extension of welfare services designed to help prevent and remove the causes of poverty and dependence on public assistance.

The Plan, and the Regulations and Agreements under it, are the result of close and continuing federal-provincial collaboration at the ministerial and official levels. This collaboration is being continued in the administration of the Plan.

The following are the main features of the Canada Assistance Plan:

Comprehensive Approach

Support is provided for the development of integrated, comprehensive general assistance programs enabling provinces to meet the varying requirements of different groups within one program and administrative framework. Where there were formerly four federal-provincial assistance programs - for the aged, the blind, the disabled, and the unemployed - the Canada Assistance Plan makes it possible for the provinces, at their option, to combine these into a single program.

Assistance on the Basis of Need

The Plan provides for the granting of assistance on the basis of an assessment of a person's budgetary requirements as well as his income and resources, rather than, as in the "categorical" programs, on the basi of income and resources only. No upper limit is placed on the benefits for which 50 per cent federal contributions are available.

Definition of Assistance

The comprehensive definition of assistance in the federal statute carries a strong rehabilitative emphasis. It covers a broad range of recurring material needs, health care services, a variety of special needs and specified welfare services.

Supplementation of Income

An important feature of the Plan is the provision of federal contributions toward the cost of supplementary payments over and above benefits paid under income maintenance programs such as old age securit (including the guaranteed income supplement), the Canada Pension Plan, the Quebec Pension Plan, Unemployment Insurance, other income, and earnings from employment.

Health Services

The Plan covers the cost of health care services for persons in nee Included are medical and surgical services, nursing, dental and optical care, drugs, prosthetic appliances, and other health services. To the extent that medical services are covered under the national Medicare program in any province, the sharing provisions of the Plan are not applicable.

Child Care

Federal sharing is extended to costs of maintaining children in the care of child welfare authorities. Most of these children live in foster homes.

Institutional Care

The Plan provides for federal sharing in the cost to the provinces and municipalities of maintaining needy persons in a wide range of residential welfare institutions, known collectively as homes for special care. These include homes for the aged, nursing homes, homes for unmarried mothers, hostels for transients and child care institutions.

Administration and Welfare Services

Contributions are made toward the cost of strengthening the admin tration of public assistance programs and extending associated welfare services. The services that may be supported include rehabilitation,

casework, counselling, assessment, adoption, homemaker and day-care services, and community development.

Indian Welfare

Federal-provincial Agreements are authorized under Part II of the Plan to provide for the extension, with the consent of Indian bands, of provincial welfare programs to Indians living on reserves or in unorganized territory in the provinces. The Plan provides for federal sharing on the basis of a special financial formula that takes into account the higher expenditures that would be incurred by the provinces in assuming this responsibility.

Work Activity Projects

Provision is made under Part III of the Plan for special work activity programs to help improve the motivation and work capacity of persons who have not been able to take full advantage of training opportunities, or who have unusual difficulty in securing or retaining employment.

BACKGROUND AND DEVELOPMENT OF THE PLAN

Previous Public Assistance Legislation

The Canada Assistance Plan had its roots in the public assistance programs which are being consolidated under it, particularly the federal-provincial programs of blind persons allowances, disabled persons allowances and unemployment assistance. Old age assistance, the fourth such program, became inoperative on January 1, 1970, when old age security became payable at age 65. These shared-cost programs were, in turn, preceded by a variety of measures to aid the poor, some of which date back to the early history of the provinces. With the advance of industrialization toward the end of the nineteenth and in the early decades of the twentieth century, public assistance programs began to assume major dimensions. It was then that it became necessary for the provincial and federal governments to accept responsibilities previously carried by voluntary agencies and institutions or by municipalities.

Initially the senior governments left responsibility for general assistance with the municipalities and gave special attention to readily definable groups regarded as having strong claims to aid on a more assured basis. An early example of such groups was widows with dependent children for whom provincial mothers allowances programs were introduced during and after the First World War.

The enactment of the Old Age Pensions Act in 1927 marked the beginning of federal-provincial co-operation in the provision of assistance to a special group. Under the Act the federal government undertook to pay half the cost of pensions of up to $20 per month granted by a province to persons 70 years of age and over who met the residence requirements and means test set out in the federal Act.

The most significant amendments to the Old Age Pensions Act were the increase in federal contributions to 75 per cent of costs in 1931 and the extension of coverage in 1937 to blind persons 40 years of age and over. In 1951 the Act was replaced by two federal-provincial programs - the Old Age Assistance Act covering persons between the ages of 65 and 70, and the Blind Persons Act covering blind persons over the age of 21 (reduced in 1955 to age 18). In the same year the federal Old Age Security Act was passed providing a universal flat rate pension for persons 70 years of age and over.

A third federal-provincial program designed for the permanently and totally disabled was adopted in 1954 with the enactment of the Disabled Persons Act. It also employed a means test under which the applicant's income and property were taken into consideration in determining eligibility for a pension and, like old age assistance, it provided for a federal contribution of 50 per cent of assistance granted. The Blind Persons Act differed in that it provided for a federal contribution of 75 per cent and allowed higher income ceilings in determining eligibility.

Historically, the federal government made grants to provinces and municipalities for general assistance in two periods of economic depressi The first occurred just after the First World War and the second during th 1930's. During the latter, grants were made on a large scale to meet assistance costs resulting from massive unemployment.

To avoid a similar situation that was expected to occur after the Second World War, the federal government established a national contributory unemployment insurance program in 1940, with contributions beginning July 1, 1941. In 1945, as part of a comprehensive post-war plan of reconstruction, the federal government also proposed the establishment of an unemployment assistance program which it would finance and administer in conjunction with unemployment insurance. However, the federal and provincial governments failed to reach agreement on the 1945 proposals and no action was taken on unemployment assistance until 1956.

In that year, the Parliament of Canada enacted the Unemployment Assistance Act which, contrary to the approach proposed in 1945, provided for a shared-cost program under which assistance would continu to be administered by the provinces and their municipalities. The Act initially contained a population threshold feature under which federal contributions began only when the number of persons receiving assistance exceeded a stated percentage of the population; this was designed to limit federal sharing to the costs of assisting the employable unemployed. In 1957, the threshold was removed and the measure moved in the direction of becoming a general assistance program, although it retained a number of important exclusions which caused it to fall well short of being a comprehensive assistance measure.

The unemployment assistance program differed from the three categorical allowance programs in that it did not specify the conditions of eligibility under which assistance had to be granted, except for the

requirement of being unemployed and in need, and it placed no ceiling on the rates of assistance to be shared. The provinces were thus free to develop their general assistance programs along lines best suited to their needs. With the stimulation of federal funds, the provinces made extensive improvements in the coverage and benefits provided under their general assistance programs in the period from 1956 to 1966, and the groundwork was laid for the adoption of a single assistance measure through which help could be provided on the basis of need to any person requiring it.

Development of the Canada Assistance Plan

At the federal-provincial conference called in September 1963 to discuss the development of a new contributory wage-related social security measure, the Canada Pension Plan, it was recognized that there was also need for an improved public assistance program. The question was further considered at the federal-provincial conference of Prime Ministers and Premiers in November 1963, which recommended the establishment of a federal-provincial working group to review the operation of all joint welfare programs, in preparation for discussion by Ministers.

A working party of federal and provincial Deputy Ministers of Welfare and other officials met in February 1964 to identify the issues that would have to be considered in developing an improved assistance program. In May 1964, the Ministers of Welfare met in Ottawa to review the proposals of the working group. They recommended that the federal government and the provinces work toward an integrated, comprehensive general assistance program based on meeting need. The provincial Ministers also recommended that the federal government share fully in the costs of mothers allowances, health services and administration.

An additional factor that supported the development of more effective assistance and welfare service programs was the growing concern being expressed about problems of poverty. It was increasingly recognized that the talents of many Canadians were being wasted because of poverty, illness, inadequate education and training, and inequality in opportunities for work. In developing its legislative program in 1965, the government concentrated particularly on bringing forward a group of measures designed to combat these problems by improving the opportunities of people affected by them.

One of the government measures referred to in the Speech from the Throne in April 1965 was the Canada Assistance Plan. It was described as a means of providing a framework for federal-provincial co-operation in helping those who need help the most. The objectives of the program would be to encourage the provision of adequate levels of assistance to persons in need and to support the development of social welfare services to assist such persons in achieving the greatest possible measure of self-support.

The government's proposals for the Canada Assistance Plan were reviewed at a second meeting of Ministers of Welfare held in April 1965, and the basic features of the Plan were approved. A third meeting of

Ministers of Welfare was held in January 1966, when additional suggestions relating to the coverage of the Plan were made, including proposals for its extension to children and youth in the care of child welfare authorities. The extensive federal-provincial collaboration in the development of the Plan ensured its relevance to varying conditions across Canada and its acceptability to the provinces which carry administrative responsibility for the programs supported by it.

A motion for the introduction of the Canada Assistance Plan Bill was placed before the House of Commons on April 4, 1966; the Bill passed first reading on June 21st and received third reading in the House of Commons on July 8th and in the Senate on July 12th. Notice of Royal Assent to the Bill was given in the Canada Gazette on July 23rd, 1966.

Development of Regulations and Agreements

Following the enactment of the legislation, extensive consultations were held with the provinces concerning the Regulations and Agreements under the Plan. The Regulations, adopted by Order-in-Council on January 26, 1967, provided further definitions of terms as required by the legislation, outlined the kinds of costs for which contributions could be made, and indicated the basis for payment of claims under the program. These were carried forward into the Agreements which outline the undertakings by the provinces and Canada under the Plan. The dates on which Agreements under Part I were made with the provinces and the Yukon Territory are indicated below. All Agreements were retroactive to April 1, 1966 for purposes of cost sharing.

Newfoundland	March 30, 1967
Prince Edward Island	March 30, 1967
Nova Scotia	March 22, 1967
New Brunswick	April 5, 1967
Quebec*	August 21, 1967
Ontario	March 28, 1967
Manitoba	March 20, 1967
Saskatchewan	March 22, 1967
Alberta	March 30, 1967
British Columbia	March 23, 1967
Yukon Territory	December 16, 1969

* The Agreement with Quebec employs Section 19 of the Canada Assistance Plan which provides that the terms of the Established Programs (Interim Arrangements) Act apply to the Plan, rather than to the four pre-existing shared-cost public assistance programs which were in effect when that Act was passed.

APPLICATION OF THE CANADA ASSISTANCE PLAN

Assistance to Persons in Need

A primary objective of the Plan is to support the provision of adequate assistance to persons in need. Contributions are made toward the cost of assistance granted on the basis of a needs test, that is, a test under which the budgetary requirements, as well as the income and resources, of applicants and their dependents are taken into account. This is in contrast to the means test under which only income and assets computed as income are taken into account within set benefit and income ceilings.

The major costs of assistance for which contributions are made under the Plan are for basic requirements which are defined in the legislation as food, shelter, clothing, fuel, utilities, household supplies and personal requirements. When provinces entered into agreements under the Plan, they agreed to take these requirements into account in determining eligibility for assistance. Allowances for items such as food, clothing, household supplies and personal requirements are usually based on rate scales set by the provinces. These allowances vary with family size and composition. For other budgetary items such as shelter, fuel, and utilities, actual costs to the recipient are generally used.

The rehabilitative emphasis in the Plan is reflected in its provision for contributions toward the costs of welfare services purchased for persons in need and items of special need obtained for such persons. Welfare services, which may be purchased on a fee-for-service basis, include rehabilitation, casework, counselling, assessment, and home-maker and day-care services. The items of special need toward which contributions may be made include tools or equipment that are essential in enabling a recipient to obtain employment and items necessary for his safety, well-being or rehabilitation. These include household equipment and furnishings, repairs to property, special food or clothing and items required by disabled persons.

Expenditures for items of special need exceeding $500 in cost require the approval of the Director of the Canada Assistance Plan. Contributions were made during the year for such items as building supplies for repairs and additions to dwellings, installation of furnaces, plumbing and wiring, household furnishings and prostheses.

The Plan is designed to support the provision of assistance to any person in need, whatever the cause of his need. The legislation identifies the major groups to whom assistance is to be provided as persons who are unable to provide adequately for themselves because of inability to obtain employment, loss of the principal family provider, illness, disability, or age. Other persons such as those who are employed but who require supplementary help may also be assisted.

The programs through which assistance is granted are variously known in the different provinces as social assistance, social allowances, social aid, general assistance, family benefits and general welfare

assistance. The patterns of administration for these programs vary from province to province. In Newfoundland and New Brunswick, the province has assumed total responsibility for the administration of assistance. This is also true in Saskatchewan with the exception of the municipal units of Prince Albert and Moose Jaw, and in Quebec with the exception of Montreal. In the provinces of Nova Scotia, Manitoba, Alberta, and Ontario, assistance is provided through a combination of provincial and municipal administration. A similar pattern is found in Prince Edward Island and British Columbia. However in Prince Edward Island three welfare bureaus and the City of Charlottetown also administer assistance. In British Columbia supplementary social allowances for old age pensioners are administered by the provincial Old Age Assistance Board. In provinces where both the province and its municipalities provide assistance, persons expected to be in need on a long-term basis are usually assisted through provincial programs, while those whose needs are of shorter duration are assisted by municipalities.

Maintenance of Children

The assistance provisions of the Plan also cover children under the age of twenty-one who are in the care or custody or under the control or supervision of child welfare authorities. This extends to children, most of whom are in foster homes, who have been placed in the care of such authorities by court order or by agreement with the parents. The assistance costs for which contributions may be made include foster home payments, frequently based on standard rates for various age groups, health care services and other needs of children. The programs covered include those administered by provincial child welfare authorities and through children's aid societies.

In the provinces of Newfoundland, Prince Edward Island, New Brunswick, Quebec, Saskatchewan and Alberta the provincial departments of welfare are responsible for the administration of child welfare program This responsibility is borne by the provincial authorities together with children's aid societies in Ontario, British Columbia, Manitoba and Nova Scotia.

Institutional Care

The costs of providing care for persons in need who are in residenti welfare institutions are also covered under the Plan. These institutions are referred to as homes for special care and include homes for the aged, nursing homes, hostels for transients, homes for unmarried mothers, child care institutions and other residential welfare institutions that have the primary purpose of providing supervisory, personal or nursing care or social rehabilitation. The Plan does not cover care provided in hospitals, correctional institutions or institutions whose primary purpose is education. The homes for special care provisions of the Plan were carried forward from the Unemployment Assistance Act and extended to cover child care institutions such as receiving homes, orphanages, some institutions for delinquent youth and specialized welfare institutions for children with physical or mental disabilities.

At the end of the year, more than 3,000 institutions with a capacity of more than 113,000 beds had been recognized as homes for special care. Of these institutions, 2,450, with a capacity of about 95,000 beds provided institutional care to adults and some 560 with a capacity of more than 18,500 beds provided institutional care to children.

Health Services

Under the Plan the federal government may reimburse the provinces for half the cost of health care services provided to persons in need. The definition of health care services covers medical, surgical, obstetrical, dental and nursing services, including drugs, dressings, prosthetic appliances, and other items or services associated with the provision of specified services. The Plan excludes services provided under any federal-provincial shared cost health measure. At present this applies in respect to insured services within the meaning of the Hospital Insurance and Diagnostic Services Act or any other prescribed hospital care services, and services covered under the Medical Care Act in any participating province. Consequently, major areas of coverage under the Canada Assistance Plan are optical, dental and nursing services, drugs and medical supplies, and payment of medical insurance premiums on behalf of persons in need.

Welfare Services

As a means of supporting the development of preventive and rehabilitative programs, the Plan authorizes contributions toward provincial and municipal expenditures for welfare services. These are described, generally, as services that have as their object the lessening, removal or prevention of the causes and effects of poverty, child neglect or dependence upon public assistance. More particularly, they include rehabilitation services, casework, counselling and assessment services, homemaker and day-care services, and community development. Services related wholly or mainly to education, correction, recreation or the provision of health or hospital care are not covered. Administrative, secretarial and clerical functions associated with the provision of welfare services and the administration of assistance are covered, as are staff training, consultation, research and evaluation associated with welfare programs. The latter are included as a means of supporting improvements in the effectiveness of personnel and encouraging assessment of programs in relation to their objectives.

An important feature of the Plan is its emphasis on prevention of the personal and social problems that lead to poverty, family breakdown and the need for public assistance. Thus, contributions can be made for costs of welfare services extended not only to persons in need, but also to persons who may become needy if they do not receive such services.

The Plan is intended to encourage the improvement of existing services and the development of new ones. In view of this, contributions are made toward provincial or municipal expenditures for welfare services that are beyond those incurred during a period referred to as the base year;

in the case of provincial departments, this is the fiscal year 1964-65. The major types of cost that are shared are salaries and wages, travel costs, attendance at conferences and seminars, certain costs of staff training and development, and fees for consultation and research.

Contributions are made when services are provided through departments or agencies that have been recognized as provincially approved agencies under the Plan. Most of the agencies in which costs are shared are provincial and municipal departments of welfare, the latter varying in size from departments employing only one or two officers to those in metropolitan areas employing several hundred persons. Some 225 municipalities are claiming for sharing in the cost of providing welfare services.

Contributions are also made, toward costs incurred by voluntary agencies to the extent that these are supported from provincial or municipal funds. These include children's aid societies, family and other agencies providing child care services, family and marriage counselling, and homemaker and day-care services. In addition, many new voluntary agencies are providing innovative services such as information, referral, counselling and crisis services in the area of drug and alcohol abuse. Many of these are described as street agencies or storefront operations. Some 350 voluntary agencies are recognized for cost-sharing purposes under the Plan.

Relationship to Categorical Programs

A basic aim of the Plan is to support the development of integrated programs through which assistance can be provided to any person in need. In line with this aim, Part V of the Plan enables the provinces, at their option, to cease accepting applications for old age assistance and for blind and disabled persons allowances and begin assisting the aged, the blind and the disabled through general assistance programs. Persons who have already qualified for allowances under these programs can be transferred to a general assistance program if they will qualify for comparable or greater benefits under that program.

Saskatchewan ceased to accept applications for categorical allowances on April 1, 1966 and transferred major portions of its existing caseloads to the Saskatchewan Assistance Plan. Ontario took similar steps with effect from April 1, 1967 and transferred a major portion of its caseloads to the Family Benefits program. Alberta ceased accepting applications under the categorical programs on January 1, 1968. Newfoundland ceased to accept applications for old age assistance and disabled persons allowances on December 31, 1967, and June 30, 1967, respectively, and, where possible, transferred recipients to general assistance. In Prince Edward Island, applications for old age assistance ceased to be accepted on April 1, 1967 and applications for disabled persons allowances on May 1, 1967; part of the caseload under both programs was transferred to general assistance. Nova Scotia ceased accepting applications under the disabled persons program on December 1, 1968, and transferred recipients who could qualify for comparable benefits to their social assistance program. Quebec ceased accepting applications for blind and disabled persons allowances on October 1, 1970 and subsequently transferred eligible recipients to social assistance

Normal operations under the Old Age Assistance Act were terminated on January 1, 1970, when the eligible age for the Old Age Security pension was lowered to 65 years. Persons receiving old age assistance at that time subsequently received benefits under the Old Age Security Act.

Provisions of Agreements under the Plan

In entering Agreements under the Plan, provinces have undertaken to meet a number of criteria that are called for in the legislation. They have agreed to the use of a needs test in determining eligibility for assistance and have undertaken to provide assistance to any person in need in an amount or manner that takes into account his requirements, for food, shelter, clothing, fuel, utilities, household supplies and personal requirements. The needs test, which is basically a budget-deficit approach to determining eligibility for, and the amount of assistance to be provided, takes into account the budgetary requirements of the applicant as well as the income and resources he has available to meet them.

The provinces have agreed not to require a period of residence within their boundaries as a condition of eligibility for assistance. They have also undertaken to provide in their law a procedure for appeals from decisions respecting applications for assistance or the granting of assistance, and to provide for an adequate method by which that procedure will be brought to the attention of applicants for assistance or recipients of assistance.

In recognition of the preventive and rehabilitative emphasis of the Plan, the provinces have undertaken to continue, as may be necessary and expedient, the development and extension of welfare services. This involves a number of approaches ranging from the hiring of additional staff and the encouragement and support of community based services to the collection and sharing of information through the preparation of reports, the use of consultants, and the development of statistical reporting systems.

Description of Provincial and Municipal Programs

The Canada Assistance Plan sets broad conditions under which the costs of assistance and welfare services can be shared. Within this general framework, however, contributions can be made toward costs of programs that are developed and administered in the manner best suited to individual provincial circumstances and preferences. Brief descriptions of the programs for which costs are shared in each province are given in the Appendix, together with a résumé of significant developments that took place in each province during 1970-71. The Appendix describes the programs as they stood at the end of the fiscal year.

ADMINISTRATION OF THE PLAN

The program is administered by the Canada Assistance Plan Division of the Welfare Assistance and Services Branch. This Division is also responsible for administering the unemployment assistance program and the blind persons and disabled persons allowances programs. The Division consists of administrative and consultative staff at headquarters and field staff located in nine of the provinces.

The field staff of the Division is responsible for carrying out administrative reviews in the field to determine the shareability of costs and for processing reimbursement claims. Field representatives are also responsible for maintaining liaison with provincial officials by advising them on interpretation of federal legislation and policies and assisting them in the preparation of claims. They also maintain contact with the Audit Services Branch of the Department of Supply and Services which is responsible for an annual financial audit of the program.

Canada has undertaken, in Agreements with the provinces, to provide consultative services, where feasible, and as requested, in areas related to the development and operation of assistance and welfare services programs. At the end of the year, consultative services were available in relation to Indian welfare, institutional care, accounting and auditing, welfare services, community care services, work activity, rehabilitation, family and child welfare, public assistance policy and administration, community development, and staff training and development.

This year saw increased interest in work activity with both Ontario and New Brunswick signing Agreements under Part III of the Plan. With the exception of Newfoundland, all provinces now have Agreements under this Part. Alberta and Manitoba indicated interest in implementing projects and some seventeen projects were in operation during the year in Nova Scotia, Quebec, Saskatchewan and British Columbia.

In the Canada Assistance Plan legislation rehabilitation services are included under the general heading of "welfare services". In the provinces rehabilitation services which relate to the Canada Assistance Plan fall into two main categories: vocational rehabilitation services found in provincial programs and projects, and rehabilitation functions and components found in family and child care services, community care services and homes for special care. During the year consultation was provided in these areas.

Definite pressures for better day-care services resulted from the release of the Report of the Royal Commission on the Status of Women, the White Paper on Income Security, and the Report of the Commission on Emotional and Learning Disorders in Children entitled "One Million Children". This year saw the crystallization of the tendency to develop programs with parental participation and the enlargement of the concept of day care to cover supplementary care required for a variety of reasons including the need for group experience. Day care is also being developed for other groups such as the mentally ill, and retarded adults. Activity centres, opened in some provinces, help to prevent institutionalization and provide a better way of life. Day care is also an important adjunct to institutional care for the aged. In cities such as Toronto, Ottawa and Winnipeg, a limited number of elderly persons are being provided with all day care or partial-day care preparatory to entering an institution.

Welfare services have been developing in relation to groups such as children, the aged and the retarded. There have been some attempts to develop services, such as holiday plans, for families.

Since the inception of the Canada Assistance Plan there have been a number of developments in the institutional field. These include an increase in the rates paid on behalf of welfare cases in homes for special care, universal comforts allowances, strengthened licensing legislation, the expansion of commercial welfare institutions and the inclusion of child care institutions in federal sharing. The past ten years have seen a four-fold increase in the number of beds and a five-fold increase in federal aid for homes for special care. Problems in this area at the present time centre on the relationship which exists among hospitals, mental institutions, and welfare institutions; the relationship between child welfare and correctional institutions, and the relationship between welfare institutions and related community care services.

Staff members were involved in the preparation of the White Paper, Income Security for Canadians, tabled in the House of Commons on November 30, 1970. This document contained a number of recommendations respecting the Canada Assistance Plan, as well as policy proposals for other programs such as Old Age Security, the Guaranteed Income Supplement, The Canada Pension Plan and Family Allowances. The White Paper proposed discussions with the provinces to deal with inadequacies in social assistance programs. These discussions would be aimed at the incorporation in the Canada Assistance Plan of stronger measures to ensure entitlement to assistance, adequacy of benefits and improved appeal procedures and administration. An attempt would also be made to provide a clearer definition of welfare services, to broaden access to services, and to provide better cost-sharing for both community services and work activity projects.

During the year consultants and other staff members continued to serve on the federal-provincial task forces on a developmental approach to public assistance, costs of welfare programs and alienation.

The provincial Deputy Ministers of Welfare met in Ottawa in June 1970. Items discussed at that time included appeal procedures; social assistance for persons in need as a result of strikes and lockouts; assistance and services for transient youth; the use of vouchers in social assistance programs, interprovincial movement of assistance recipients, and staff development and training. Progress reports were presented by the federal-provincial task forces, and it was agreed that final reports would be prepared prior to the Federal-Provincial Conferences of Ministers and Deputy Ministers of Welfare scheduled for January, 1971.

Meetings of the Ministers and Deputy Ministers of Welfare were held in Ottawa late in January 1971. Prior to these meetings the final reports of the Task Force on a Developmental Approach to Public Assistance and the Task Force on Costs of Welfare Programs were completed. These reports and the White Paper on Income Security formed the basis for considerable discussion.

The Report on a Developmental Approach to Public Assistance deals with budget standards, simplified eligibility determination, employment opportunities, and overpayment of assistance. It also comments on the relationship of public assistance to other socio-economic programs. Extensive recommendations are made in each of the specific areas studied.

With respect to budget standards, the Report concludes that the major objective of assistance programs is the provision of benefits that will support an adequate standard of living, meaningful family functioning and participation in community life. Available techniques for defining budgetary standards offer a means for the precise statement of these objectives and their assessment in terms of current programs.

The Task Force concludes that very significant simplification of eligibility determination is possible. Such a simplified system would, however, require major restructuring of public assistance programs and social service delivery systems. It was recommended further that determination of eligibility for public assistance be separated from the provision of social services and that assistance recipients utilize such services on a voluntary basis.

Concerning employment, the Task Force is of the opinion that significant numbers of assistance recipients would prefer to be self-supporting. Employment and rehabilitation services geared to their needs can help these persons to become self-supporting.

The Task Force recommended that steps be taken to reduce the incidence of over-payments; that recoveries be made where there are sufficient resources or where there has been fraud; that recovery not be made from assistance payments unless fraud is involved and that legislation be amended to provide for the periodic write-off of over-payments that cannot be recovered.

It was further recommended that information systems within welfare programs provide data that will help to identify and define emerging social problems and support socio-economic planning. It was suggested also that welfare authorities participate more effectively in the formulation of public policies affecting the demand for welfare assistance and services, and that the relationship between welfare programs and other programs such as health care, correctional services, education, recreation and economic development be reviewed jointly to identify roles and responsibilities and means of improving co-ordination.

The Task Force on Costs of Welfare Programs recommended that a federal-provincial group of experts be appointed to develop an information system with common input and characteristics on welfare activities by each province and the country as a whole. This system would encompass social, economic, demographic and other data required for program analysis, development and administration. It was also recommended that the federal government, in co-operation with the provinces, undertake further research respecting the factors which affect the cost of welfare and the applicability of cost-benefit techniques to welfare. The Report includes a model of a statistical reporting system for financial assistance

In addition to consideration of the Task Force Reports, discussions at the January 1971 meeting of Deputy Ministers of Welfare focussed on the White Paper on Income Security, transient youth, the non-medical us

of drugs, unemployment and social assistance and the interprovincial movement of welfare recipients. The federal-provincial Task Force on Alienation presented an interim report. It was agreed that the group would continue with its studies.

At their January 1971 meeting the Ministers of Welfare reviewed the reports of the federal-provincial task forces and agreed that the Reports of the Task Force on a Developmental Approach to Public Assistance and the Task Force on Costs of Welfare Programs be published so that the public would be aware of the recommendations.

The Ministers also considered a paper "Composite Review of Proposals on Social Assistance and Welfare Services", which integrated recommendations from the White Paper on Income Security the Task Force Reports and resolutions of the Poor People's Conference held in January, 1971. The federal government indicated its intention to undertake consultation with the provinces regarding the amendment of the Canada Assistance Plan with specific proposals to be discussed at a future conference of Ministers. Particular areas of interest are entitlement to social assistance, incentives, adequacy of assistance, appeal procedures, cost-sharing, welfare services, employment opportunity services, communication and information, and administration.

The ministerial discussions also covered the National Council of Welfare, non-medical use of drugs, family planning, Welfare Grants and divorce proceedings.

The Minister of National Health and Welfare tabled a report on ransient youth and indicated that decisions would soon be taken regarding he creation of job opportunities for summer 1971. The provinces would e consulted before the implementation of any plans. The Minister also abled a press release outlining the program being developed to deal with roblems arising out of the non-medical use of drugs. A background aper on the proposed family planning program was presented and the roposal for a national conference in 1972 was supported by the Ministers. he Minister also outlined the Department's emerging interest in the field f divorce and processes of family reconciliation. He stressed the esirability of discussions with the provincial departments of welfare and ttorneys-general and representatives of voluntary counselling agencies.

xpenditures for Assistance and Welfare Services

During the year federal contributions to the provinces under the Plan mounted to $390,858,000. In addition Quebec received an estimated 06,574,000 in the form of tax abatements and cash adjustments under e Established Programs (Interim Arrangements) Act. Total federal sts in respect of the Plan amounted to $597,432,000. Payments by rovince and program for the fiscal years 1969-70 and 1970-71 are idicated in the tables on pages 17 and 18. The table below indicates te number of persons being assisted under the Plan as at March 31, 1971.

NUMBER OF PERSONS BEING ASSISTED UNDER THE CANADA ASSISTANCE PLAN AS AT MARCH 31, 1971

Province	Child Care	Assistance Recipients*	Adults in Institutions	Total
Newfoundland	2,202	91,852	1,260	95,314
Prince Edward Island	381	10,552	955	11,888
Nova Scotia	4,735	45,593	2,000	52,328
New Brunswick	3,427	65,756	1,775	70,958
Quebec	42,646	489,073	14,219	545,938
Ontario	17,604	364,046	27,153	408,803
Manitoba	5,004	75,763	3,244	84,011
Saskatchewan	3,493	68,338	5,759	77,590
Alberta	7,784	93,960	3,282	105,026
British Columbia	8,552	154,851	6,143	169,546
Yukon Territory	336	280	53	669
CANADA	96,164	1,460,064	65,843	1,622,07

* Including dependents.

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1970-1971

Province	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	17,664	1,439	708	1,464	691	--	21,966
Prince Edward Island	1,591	1,735	197	149	94	--	3,766
Nova Scotia	10,169	3,469	1,221	229	1,646	9	16,743
New Brunswick	11,028	1,923	954	1,337	--	--	15,242
Quebec*	118,223	53,620	12,702	11,529	10,500	--	206,574
Ontario	116,312	29,714	13,842	992	15,303	--	176,163
Manitoba	20,787	1,083	1,977	1,585	2,755	--	28,187
Saskatchewan	14,825	2,861	981	1,111	818	25	20,621
Alberta	30,528	1,735	3,481	404	3,044	--	39,192
British Columbia	49,811	5,781	4,017	3,275	5,316	7	68,207
Yukon Territory	128	150	254	53	186	--	771
TOTAL	391,066	103,510	40,334	22,128	40,353	41	597,432

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1969-1970

Province	General Assistance	Homes for Special Care	Health Care	Child Welfare	Welfare Services	Work Activity Part III	Total
	$	$	$	$	$	$	$
Newfoundland	16,534,688	1,343,359	1,261,150	671,017	478,366	--	20,288,580
Prince Edward Island	1,291,675	1,534,099	188,440	191,636	86,673	--	3,292,523
Nova Scotia	9,299,838	3,504,938	256,825	1,121,381	1,062,855	--	15,245,837
New Brunswick	6,678,626	1,814,618	1,493,514	1,009,848	798,686	--	11,795,292
Quebec*	90,400,000	11,900,000	11,000,000	33,800,000	9,500,000	--	156,600,000
Ontario	85,885,625	18,446,497	5,759,586	11,427,592	10,319,361	--	131,838,661
Manitoba	14,498,568	141,979	1,153,335	1,775,732	1,690,798	--	19,260,412
Saskatchewan	10,634,603	2,448,673	998,064	1,010,353	2,123,147	18,574	17,233,414
Alberta	23,783,483	1,174,253	771,262	3,158,174	2,447,704	--	31,334,876
British Columbia	30,975,191	4,168,000	2,027,064	3,087,534	2,828,473	--	43,086,262
Yukon Territory	152,889	--	--	--	--	--	152,889
TOTAL	290,135,186	46,476,416	24,909,240	57,253,267	31,336,063	18,574	450,128,746

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

During the year, contributions were also made under the three other shared-cost programs administered by the Division: blind persons and disabled persons allowances, and unemployment assistance. Expenditures for these programs for the fiscal years 1969-70 and 1970-71 are shown below. The decrease in payments is attributed mainly to larger portions of the groups covered coming under the provisions of the Canada Assistance Plan. As a result of the reduction of the age of eligibility under the Old Age Security Act to 65 years, effective January 1, 1970, there were no payments made during 1970-71 under the Old Age Assistance Act.

Program	Expenditure	
	1969-70[1] ($ million)	1970-71[2] ($ million)
Old Age Assistance	1.5	0.2 (Cr.)[3]
Blind Persons Allowances	3.3	1.6
Disabled Persons Allowances	11.9	3.6
Unemployment Assistance	14.6	9.1
TOTAL	$31.3 (million)	$14.1 (million)

1) Includes amounts received by Quebec under the Established Programs (Interim Arrangements) Act on behalf of these four programs: $0.8 million for old age assistance, $1.4 million for blind persons allowances, $7.5 million for disabled persons allowances and $13.9 million for unemployment assistance.

2) Excludes amounts received by Quebec under the Established Programs (Interim Arrangements) Act on behalf of the three categorical programs but includes $8.3 million received for unemployment assistance.

3) Recovery of overpayments from Old Age Security accounts for the credit.

APPENDIX

PROVINCIAL PROGRAMS SUPPORTED DURING 1970-71 UNDER THE CANADA ASSISTANCE PLAN

As described in the body of this report, the federal government contributes toward the costs of assistance and health and welfare services provided by the provinces to persons who require them.

This appendix outlines the provincial programs through which this help was provided during the fiscal year 1970-71, and includes a résumé of significant developments in the programs during the year. The references are to programs in effect during 1970-71.

NEWFOUNDLAND

General Assistance

Short-term assistance is provided under the Social Assistance Act to needy unemployed persons, and to persons such as needy mothers and incapacitated persons who require assistance on a long-term basis. Benefits are determined on the basis of budgetary allowances, set by regulation, to cover food, clothing, personal care, fuel and rent or, in the case of a person living in his own home, household maintenance and utilities. Assistance may also be granted to cover special needs such as the repair or renovation of homes, transportation for needy persons who are sick, and for burials. The program is administered by the Department of Social Services and Rehabilitation through its district offices.

Health Care Services

Health care services for persons in need, other than those services provided through medical care and hospital insurance programs, are provided by the provincial Department of Health with costs shared under the Canada Assistance Plan. Included are fees for nursing care and costs of drugs. Dental, optical, and prosthetic services may be provided, under prescribed conditions, as may transportation to and from medical centres.

Institutional Care

Needy persons requiring institutional care are assisted through the social assistance program in meeting the costs of care in nursing homes, homes for the aged operated under religious auspices, and in proprietary boarding homes licensed by the Department of Social Services and Rehabilitation. In addition, a 220-bed institution, Hoyle's Home, is operated by the Department.

Some one hundred and fifty homes for adults containing domiciliary and nursing beds, were listed as homes for special care. A comforts allowance of $15.00 per month is paid to needy residents of long stay homes, hospitals and sanatoria.

Child Care

Federal contributions are made toward the cost of maintaining children placed in foster and group homes under the authority of the Child Welfare Act. This program is administered by the Child Welfare Division of the Department of Social Services and Rehabilitation through its district offices. Foster home rates vary with the age of the child in care.

Child welfare institutions covered for cost sharing include the Children's Home in St. John's, which provides care for disabled children, the Boys' Home and Training School (Pleasantville and Whitbourne) and the Girls' Home and Training School which care for over 100 juveniles. Sixty-five new child care institutions were listed during the year.

Welfare Services

Contributions under the Canada Assistance Plan are being made for new costs of welfare services provided through the Department of Social Services and Rehabilitation. These costs include administering the social assistance program and providing associated welfare services, as well as providing child care, protection and adoption services.

Significant Developments during 1970-71

An amendment to the Social Assistance Act with effect from July 7, 1970, provided for the establishment of an Administrative Review Committee and an independent appeal body, the Social Assistance Appeal Board. Any person who has a grievance with respect to the administration of social assistance may file a written request for review by the Administrative Review Committee within 60 days of a decision or finding taking place. A decision of the Committee may be appealed to the Social Assistance Appeal Board within 30 days of the decision being made. The Board is composed of three members appointed by the Minister of Social Services and Rehabilitation. The members may not be employees of the provincial government or any of its agencies. One board member must be a recipient of long-term assistance and the other two must have experience in social welfare, education or insurance. The Board has the powers of a Commissioner under the Public Enquiries Act and witnesses before it are bound by the provisions of the Act.

The Northern Labrador (Social Services and Rehabilitation) Act 1970 came into force. This Act established the Division of Northern Labrador Services within the Department of Social Services and Rehabilitation. The Division is responsible for the provision of assistance and services to Indians, Eskimos and other persons residing in Northern Labrador. These costs are not shared under the Canada Assistance Plan.

Effective January 1, 1971, fuel allowances for recipients of long-term assistance were increased from $15 to $20 per month for the months of January to April inclusive.

Other changes made to the Social Assistance Regulations on March 30, 1971, to take effect on April 1, 1971, included the provision of an allowance for special needs of up to $40 per month for persons in receipt of Old Age Security and the Guaranteed Income Supplement whose spouses are under sixty-five years of age. Also, with effect from April 1, 1971, monthly food rates for recipients of short-term assistance were increased to $35 for a single person or head of a household, to $30 for each additional adult and to $20 for each child. These rates are the same as those for long-term recipients.

Recipients of short-term assistance will be permitted allowable income of up to $25 per month for single persons and families of not more than five persons. This amount may be increased by $5 per month for each person in excess of five up to a maximum of $50 per month. Short-term social assistance is now paid by cheque and not by voucher as formerly.

Allowances paid on behalf of needy persons in approved institutions for special care were increased from $150 to $300 for ambulatory persons and from $240 to $360 for bedridden persons with effect from November 1, 1970.

PRINCE EDWARD ISLAND

General Assistance

General assistance is provided under the General Welfare Assistance Act. Benefits are determined on the basis of budgetary allowances for requirements which include food, clothing, shelter, household and personal items, fuel, and utilities. Provision is also made for assistance to cover items of special need, including housekeeping services and materials or services required in rehabilitation. The program is administered by the provincial Department of Welfare, three welfare bureaus and the City of Charlottetown.

Health Care Services

The General Welfare Assistance Act provides for the granting of aid to cover the costs of health care services. Such services may include necessary medical and surgical services, nursing, dental care, optical care, essential prescribed drugs and appliances.

nstitutional Care

Persons in need in nursing homes, homes for the aged, hostels and ther residential welfare institutions are assisted to meet the costs of are under the general welfare assistance program. Persons in care are lso entitled to a comforts allowance of up to $10 per month.

During the year, ten institutions for adults having a total of 1,018 domiciliary and nursing beds were listed as homes for special care under the Plan. Provincially operated institutions account for about 863 of these beds. Included among the institutions is a half-way house for the treatment of alcoholics.

Child Care

Provincial payments are made for the maintenance of children who are placed in foster homes under the authority of the Children's Protection Act. Costs covered include those for neglected children permanently or temporarily committed by the Courts to the care and custody of the child welfare authorities.

Two child care institutions having a total of 85 beds are listed as homes for special care.

The child care program is administered by the Director of Child Welfare, Department of Welfare.

Welfare Services

Federal contributions are being made toward new costs of welfare services provided by the provincial Department of Welfare and three welfare bureaus, including costs of administering the general welfare assistance program and of providing child care, protection and adoption services.

Significant Developments during 1970-71

Effective June 10, 1970, monthly food allowances were increased from $15 to $20 for each child under 12 years of age. The allowance for first and second adults in a family remains $30 per month but that for each additional person has been increased from $20 to $25.

The per diem rate in provincially operated homes was increased from $12 to $14 with effect from June 1, 1970.

The Children's Protection Act was amended effective June 25, 1970. As a result, when an order is made under Section 20 of the Juvenile Delinquents Act (Canada) committing a child to the Superintendent of Neglected and Delinquent Children or to an industrial school, the Provincial Secretary is considered to have made an order on the same date directing that the child be dealt with under the provisions of the Children's Protection Act.

NOVA SCOTIA

General Assistance

General assistance is provided under Parts I and II of the Social Assistance Act 1970.

Provincial assistance is provided under Part I to needy mothers with dependent children, disabled persons, foster mothers and dependent fathers with dependent children, and dependents 18 years of age and over pursuing an educational program. Assistance is paid on the basis of a needs test with maximum benefits for disabled persons amounting to $100 per month. Benefits for needy families, calculated at one hundred per cent of assessed budgetary requirements, are paid up to a maximum of $175 per month. Needy women 60 to 65 years of age may receive up to $75 per month. The maximum amount payable to persons 65 years of age and over who do not qualify for Old Age Security is $100 per month.

Municipal assistance is provided under Part II of the Act to persons not covered by the provincial assistance program, or to supplement provincial assistance. Under this Part, the province sets budget standards and also provides grants to municipalities for the payment of assistance on the basis of need. Provincial contributions amount to seventy-five per cent or more of costs, depending on the fiscal capability of the municipality. Assistance is administered through municipal welfare departments and, in several areas, by the provincial Department of Public Welfare or a local children's aid society on behalf of the municipality.

Health Care

Persons in need are covered by medical care and hospital insurance programs. Additional assistance may be provided to meet the costs of special medical examinations, special transportation and rehabilitation services.

Institutional Care

Needy persons requiring institutional care are assisted by municipalities under Part II of the Social Assistance Act. Care is provided in sixteen municipal homes for the aged, four municipal homes for the disabled (which care mainly for mentally retarded adults), and in a number of proprietary homes for the aged and nursing homes licensed by the Department of Public Welfare under the Boarding Homes Act, or by the Department of Health under the Nursing Homes Act.

During the year, about 120 homes providing nursing or domiciliary care for adults were listed as homes for special care under the federal cost-sharing Agreement. Rates paid for care in each home are determined according to the types and levels of care provided and are approved by the Department of Public Welfare. Residents of homes are allowed a comforts allowance of $15 per month. Municipalities may also pay a comforts allowance to needy patients of mental and tuberculosis hospitals.

Child Care

Federal contributions are being made toward the costs of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Act. Supervision of such children is the responsibility of the Family and Child Welfare Division of the provincial

Department of Public Welfare, nine children's aid societies and three family and children's service agencies. Payments for maintenance are based on monthly rates set by a committee established under the Child Welfare Act.

Provincially owned and operated child care institutions for which costs are shared, include the Nova Scotia Training School for Retarded Children at Truro, and five homes for retarded children. These have a bed capacity of over 500. Also covered are the Nova Scotia Boys' and Girls' Schools which care for about 185 juveniles; St. Euphrasia's Training School, under religious auspices, provides another 60 beds for the care of juveniles. Some thirteen child caring institutions operated by voluntary or religious organizations are also listed under the Plan.

Welfare Services

Federal contributions toward new costs of welfare services are being made for three kinds of agencies in Nova Scotia: the provincial Department of Public Welfare, including headquarters administration and regional and district offices; organized municipal departments of welfare responsible for the administration of assistance and the provision of related welfare services, and children's aid societies and family and children's service agencies in which the province pays the cost of supervising children in care and contributes, together with the municipalities, to the costs of protection services, services to unmarried mothers, and adoption services.

Significant Developments during 1970-71

The Social Assistance Act 1970 contains a new part, Part III, which relates to appeals. Prior to this, all references to appeals were contained in the Regulations. Recipients of provincial or municipal assistance may appeal decisions of the Director of Provincial Social Assistance, Municipal Welfare Directors, or Welfare Committees, with respect to the administration of assistance. Regulations were amended to strengthen appeal procedures and to make them more effective.

Part IV of the Social Assistance Act repealed the Old Age Assistance Act and discontinued the receipt of applications under the Disabled Persons Allowances Act.

Through Order in Council, effective August 10, 1970, changes were made in the charging of wages against the budgetary requirements of a recipient from 50 per cent of gross wages to 50 per cent of net wages or 25 per cent of net wages when the recipient or applicant is disabled and wages result from a rehabilitation program approved by the Minister or work activity of a therapeutic nature.

An Act respecting settlement received assent on April 24, 1970, and came into force on September 1, 1970. The provisions of this Act apply whenever there is a need to determine settlement unless an Act contains specific references to settlement. The Settlement Act includes settlement provisions formerly found in the Social Assistance Act.

A number of amendments were made to legislation affecting children and parents. Under the Child Welfare Act, the definition of a child in need of protection includes both emotional rejection and physical mistreatment. The Act now provides for leave from Training Schools.

Under the Unmarried Parents Act the age for maintenance of a child has been raised from 16 to 18 years and the lump sum payments to be paid by a putative father increased.

It is now possible for either the mother or the father of an infant to make application under the Infants Custody Act. Previously only the mother could make application. These cases may now be heard in Family Court.

With the passing of the Age of Majority Act, all rights and responsibilities of adults apply to persons 19 years of age and over.

The Day Care Services Act provides for the establishment and operation of day care facilities by the province and by municipalities. Financial assistance may be provided by the province to non-profit organizations operating day care centres. The Family and Child Welfare Division is responsible for the administration of the Act.

NEW BRUNSWICK

General Assistance

General assistance for persons in need is provided under the Social Welfare Act which came into effect on January 1, 1967. Benefits are determined on the basis of budgetary allowances which include set amounts for food, clothing, household and personal items, and maximum amounts for shelter, fuel and utilities. Provision is also made for items of special need. The program is administered by the province through five health and welfare regions.

Health Care Services

The services of physicians, surgeons, obstetricians and other specialists are provided under the Social Welfare Act to recipients of assistance. Recipients are issued medical cards and services are made available through an agreement between the province and the New Brunswick Medical Society. Additional provision is made for other health needs, including radiological, laboratory and other diagnostic services not available under the Hospital Services Act, prescribed drugs, dental care and vision services.

Institutional Care

Needy persons requiring institutional care are assisted under the Social Welfare Act to meet the costs of care in homes for the aged, nursing homes and other types of residential welfare institutions. These homes are licensed under the Health Act with rates established in each

home in accordance with the level of care provided subject to the approval of the Director of Welfare. Residents of these homes retain $15 per month as a comforts allowance.

During the year, 91 institutions providing domiciliary or nursing care for adults and having a total of about 2,817 beds were listed as homes for special care under the federal cost-sharing agreement.

Child Care

The province is responsible for the maintenance of all children in care, and federal contributions are being made toward the cost of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Act. Daily board rates are based on the age of the child. Additional amounts are paid for clothing, health services, education and other requirements.

Child care institutions accepted for cost-sharing under the Canada Assistance Plan include the New Brunswick Protestant Orphans' Home, Saint John, with 173 beds and three other institutions with over 327 beds.

Welfare Services

Contributions are made under the Canada Assistance Plan for new costs involved in administering assistance under the Social Welfare Act, providing related welfare services, and extending child care and protection services. All services are provided by the province through its district offices.

Significant Developments 1970-71

Effective April 1, 1970, changes were made in the gross price of drugs provided by pharmacists to welfare recipients. Formerly the gross price was two-thirds of the list price plus a professional fee of $1.70 for each prescription. The gross price of drugs provided by a pharmacist is the lesser of the following, all calculated to the nearest five cent amount: two-thirds of the manufacturer's suggested retail or list price plus a professional fee of $1.95 for each prescription; eleven-tenths of the manufacturer's selling price when there is no suggested retail or list price plus a professional fee of $1.95 or the price ordinarily charged for the drugs or services by the pharmacist.

The Child Welfare Act was amended with effect from July 20, 1970. Under the amended legislation a parent who, because of circumstances such as illness, is temporarily unable to provide adequately for his child may request the Director of Child Welfare to enter into an agreement for his care and maintenance. Such an agreement may be made for up to one year and is open for renewal. The Director may terminate the agreement at any time if it is deemed to be in the best interests of the child and the child apprehended as a child in need of protection.

When it is in the best interests of a ward, the Director may give notice in writing to any person prohibiting him from communicating with the ward or his foster parents in any way without the written consent of the Director. Anyone given such notice is guilty of an offence if he attempts communication without the written consent of the Director.

A new section provides that no action may be taken against anyone who informs the Director of Child Welfare of the abandonment, desertion, physical ill-treatment or need for protection of a child unless the information was given maliciously or without reasonable or probable cause.

Provision is made for the hearing of complaints from persons adversely affected by administrative decisions made under the Child Welfare Act.

Decisions made under the Child Welfare Act by judges of provincial or county courts may be appealed to the Queen's Bench Division of the Supreme Court. Appeal against an order or decision made in the latter Division lies to the Appeal Division of the Supreme Court.

QUEBEC(1)

General Assistance

Social aid is provided under the terms of the Social Aid Act and Regulations which came into force on November 1, 1970. The Act provides for assistance to three categories of persons: families or individuals lacking means of support, whose ordinary and special needs are considered; families or individuals faced with a situation which endangers health, threatens destitution, or deprivation of the means of subsistence, who are entitled to preventive aid for special needs and, family heads, or individuals who work but whose income is not sufficient to meet either ordinary or special needs. Assistance to needy mothers who do not qualify for social aid is administered under the Quebec Needy Mothers Allowances Act with costs shared under the federal Unemployment Assistance Act.

Assistance is granted on the basis of the deficit between needs and available income provided that the family or individual is not disqualified because of the value of property owned. Assistance may be furnished in money, in kind, in the form of services, or as a loan or guarantee of repayment of a loan.

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1) Federal financial support of the programs covered under the Canada Assistance Plan Agreement with Quebec is provided under the terms of the Plan and the Established Programs (Interim Arrangements) Act.

Allowances for food, clothing and household and personal requirements range from $46 per month for a single person, to from $143 to $190 for a couple with four children depending on the ages of the children. Additional assistance is granted where there are more than four children or more than two adults. Shelter allowances vary according to locality and family size. The allowance, which includes heat, electricity, gas and water costs, ranges from $45 for a single individual to $95 for families of four and more. Additional assistance for lodging, up to fifty per cent of the established shelter allowance, may be granted as an item of special need when necessary to protect personal health or family unity, or when necessity is indicated by a recovery plan. This provision also applies to persons who are boarding.

Board rates are $60 per month for a single person, $90 for two persons and $110 for three persons. The clothing and personal allowance for boarders is $15, $28, and $39 per month respectively.

For persons under 30 years of age who are capable of working the total allowance may not exceed $75 per month for food, clothing, household and personal requirements and shelter.

Families may have property of up to $2,000 plus $200 for each dependent child but liquid assets may not exceed $500. Single persons may have property of up to $1,000 but liquid assets may not exceed $200. Certain items are exempted in determining property value. These include: articles of general use up to $1,000 in value; capital invested in an annuity; tools necessary to employment up to $1,000 in value; a motor vehicle to the value of $1,000; and the surrender value of a life insurance policy to the value of $1,000. The house used for a residence is also exempted provided the person's net equity in the property, based on current market value, does not exceed $8,000 after the deduction of mortgage and other charges. If the net equity exceeds $8,000 but not $15,000, assistance may be provided as a loan or guarantee of repayment of a loan.

In computing income, net income from work, roomers and boarders, rents and income from other sources are considered subject to certain conditions. The following items are excluded in determining income: federal family and youth allowances; provincial family and schooling allowances; occasional gifts up to $100 per annum; benefits from charitable organizations; voluntary contributions by individuals of up to $25 per month; payments under the Public Charities Act for the care of a foster child; occasional earnings of dependent children and income from work during the month in which social aid ceases.

The social aid program is administered through regional and local offices of the Department of Social Affairs except for the City of Montreal which administers the program on behalf of the province.

An applicant for social aid must be sent written notice of the decision taken on his application including the reasons. With this notice the director of the local office must forward an information leaflet describing the right to review and procedures to be followed. When a review is

requested, the regional director must make a detailed study of the grounds for complaint and review the decision of the local office. He must then send a written notice of his decision and enclose a leaflet which indicates that the client may appeal to the Social Aid and Allowances Appeal Board. Notice must also be sent to the director of the local office who must implement the decision, effective from the date of the notice. Decisions of the Social Aid and Allowances Appeal Board must also include reasons and be implemented from the date specified by the Board. The decision of the Board is final.

Health Care Services

Health care services are provided to recipients of assistance under the Social Aid Act. The benefits include physicians' services, diagnostic services, dental surgery and certain optometric services which are provided through the universal health insurance program administered by the Quebec Health Insurance Board. Additional benefits, such as the cost of purchase and repair of eye-glasses, the cost of dental care, the cost of purchase or rental of prostheses, orthopedic appliances or medical equipment of any description, as well as drugs and other required services, are provided as items of assistance under the Social Aid Act.

Institutional Care

Needy persons requiring institutional care are maintained in homes for the aged, nursing homes and other types of residential care institutions which are operated by religious and charitable organizations or are under private ownership. Licensing and supervision are carried out by the Department of Social Affairs. Rates for the maintenance of needy residents are established on the basis of the level of care provided by the home and that required by the resident.

At the end of the year about 455 institutions providing domiciliary or nursing care to adults were listed as homes for special care under the federal cost-sharing agreement. Residents of these homes retain $22 per month as a comforts allowance. This amount is also paid to needy patients in hospitals and sanatoria.

Child Care

Federal contributions are made toward the costs of care and maintenance of children in child welfare institutions or in the care of social agencies under the terms of the Public Charities Act. Full financial responsibility for child welfare costs has been borne by the province since April 1, 1966. Child care may be provided in a variety of children's institutions, foster homes, or private day nurseries. The range of services spans the field from general supervision and care of normal children to the training of retarded children and intensive treatment and protection for children with psychological problems.

During the year, 138 child care institutions were listed as homes for special care. Eighty-six of these are operated under voluntary auspices.

Welfare Services

Federal contributions are being made for new costs of welfare services provided primarily under the Public Charities Act, the Social Allowances Commission Act and the Adoptions Act, by the Department of Social Affairs, by the City of Montreal and by voluntary social welfare agencies.

Significant Developments during 1970-71

Quebec's new social aid program came into force with the proclamation of the Social Aid Act effective November 1, 1970. The main points of this program were described previously.

An Act to amend the Social Aid Act, the Schooling Allowances Act and the Quebec Family Allowances Act reconstituted the Social Aid Appeal Board as the Social Aid and Allowances Appeal Board. This Board is authorized to hear appeals under the Quebec Family Allowances Act and the Schooling Allowances Act as well as the Social Aid Act.

The Social Affairs Department Act, proclaimed in force December 22, 1970, established the Department of Social Affairs to assume the functions formerly carried out by the Departments of Health and of Family and Social Welfare, respectively.

The Family and Social Affairs Council Act, also proclaimed in force December 22, 1970, established a new advisory and consultative body, the Family and Social Affairs Council, which replaces the Family Superior Council. The Council, with the approval of the Minister of Social Affairs, may conduct studies in the fields of health, social services, social aid and social insurance.

ONTARIO

General Assistance

The Family Benefits Act and the General Welfare Assistance Act respectively provide for long or short-term assistance to persons in need.

Individuals and families who require maintenance on a long-term basis are granted an allowance under the Family Benefits Act. This Act provides for aid to persons 65 years of age or older, who are not in receipt of an allowance under the Old Age Security Act; women 60 years of age and over; disabled or blind persons 18 years of age or over; mothers with dependent children if the father is absent or unemployed; dependent fathers with dependent children and foster mothers raising children other than their own.

Benefits are determined on the basis of pre-added budgets which cover food, clothing, household maintenance and personal requirements. Additional provisions are made for fuel and shelter and free medical and

hospital insurance are provided. In determining benefits consideration is given to family size and composition. This program is administered by the Department of Social and Family Services and its 22 regional offices.

Persons not able to qualify under the Family Benefits Act may be assisted under the municipally administered General Welfare Assistance Act. Municipal assistance is also provided on a needs test basis, using pre-added budgets and maximum shelter and fuel allowances set by the province. Under this program, provision is made for granting supplementary aid to needy recipients of old age security, categorical allowances, family benefits, and dependent fathers', widows' and unmarried women's, and rehabilitation allowances.

Special assistance may be provided to or on behalf of persons in need to cover items such as drugs, prosthetic appliances and costs of funerals and burials. Municipalities are reimbursed by the province for 80 per cent of the cost of providing assistance and supplementary aid and 50 per cent of the cost of special assistance.

Municipalities are reimbursed by the province for the administration of welfare services, salaries, travel, etcetera, at 50 per cent of the cost in excess of the 1964 base year.

Health Care Services

Recipients of assistance receive medical and hospital coverage under the universal hospital insurance and medical care programs. Dental services may be provided by the province or a municipality under the Family Benefits Act or the General Welfare Assistance Act. Other health care services are provided on a supplementary basis by municipalities under the authority of the General Welfare Assistance Act.

Institutional Care

Institutional care for adults is provided through a number of programs in the province:

1. Elderly persons are cared for in over 75 homes operated by cities, counties, and districts under the Homes for the Aged and Rest Homes Act. These provide upwards of 14,400 beds for the care of the aged. The province reimburses municipalities for 70 per cent of net costs of providing care for needy persons in such homes.

2. Aged, infirm and other persons are also cared for in over 110 institutions operated by voluntary and religious organizations under the Charitable Institutions Act. These provide more than 8,400 beds for the residential care of such persons. The province, during the year under review, reimbursed such homes for 80 per cent of their net costs, based on the average daily costs of care and maintenance, but not to exceed $9.00 per day.

3. Assistance to cover the costs of care for needy residents in licensed nursing homes is provided by the province through the Family Benefits Act, and the General Welfare Assistance Act up to a maximum of $11.00 per day. Under the latter Act, municipalities receive provincial reimbursement amounting to 80 per cent of the maximum. These nursing homes number about 450 and provide over 14,000 beds, mainly for the care of aged persons.

Residents of the above homes retain $25.00 per month as a comforts allowance.

4. In addition to the above, under the Homes for Special Care Act, there are approximately 225 residential homes and 242 nursing homes with a total capacity of approximately 5,900 beds licensed to care for persons discharged from mental hospitals. The cost of care for needy residents of such homes is paid by the province under the Family Benefits Act. The maximum cost is $11.00 per day for nursing care and $36.75 per week for residential care. Additional costs for clothing, personal effects and funerals are also shareable.

Child Care

Federal contributions are made toward the costs of maintaining children placed in foster homes and in child care institutions under the authority of the Child Welfare Act. The major portion of costs is for children placed by the more than fifty children's aid societies in the province. Maintenance costs for these children are shared 60 per cent by the province and 40 per cent by the municipalities. Costs for the care and maintenance of children of unmarried parents are borne entirely by the province.

During the year, about 200 child-caring institutions in Ontario with a capacity of some 2,365 beds were listed as homes for special care under the federal cost-sharing agreement. These include receiving and group homes operated by children's aid societies and institutions for the emotionally disturbed.

Welfare Services

Federal contributions are made toward new costs of welfare services provided by three kinds of agencies in the province, namely, the administration of assistance and the provision of welfare services through the provincial Department of Social and Family Services; the cost of administering general welfare assistance and other programs through about seventy municipal welfare departments; and the cost of providing child welfare services, including supervision of children in care, adoption services, protection services and services to unmarried mothers, through children's aid societies in the province.

Significant Developments during 1970-71

Rates of assistance under the Family Benefits Act were increased. The maximum monthly rate for a family of four was increased by $30 to $330 and additional amounts for beneficiaries in excess of four by $5 to $15 per month.

Pre-added budgets (food, clothing, utilities, household supplies and personal requirements) were increased from $62 to $68 for single persons and from $96 to $109 for married couples. Pre-added budgets for families with children were also increased by varying amounts. For example, amounts for two-parent families with six children range from $264 to $350. They previously ranged from $236 to $314.

Maximum shelter allowances for single persons were raised from $43 to $47 per month. For persons with dependents, the allowance was increased from $75 to $85 for unheated premises and from $85 to $95 for heated premises. An additional $5 may be granted for each additional beneficiary in excess of two. Fuel allowances were revised, and maximum yearly amounts vary according to the type of accommodation, the number of rooms and the location. The yearly amount for detached houses ranges from $87 to $288 in a territorial district and from $61 to $203 elsewhere in the province.

Board rates were increased. The allowance for a single person was raised from $85 to $90 per month and from $130 to $145 for a married couple.

Maximum monthly allowances for foster children have been increased by $5 to $50 for the first child, $45 for the second and $35 for each additional child.

The travel or transportation allowance for a blind or disabled person who requires a wheelchair when travelling was increased from $10 to $30 per month. The allowance for all other disabled persons was raised from $10 to $15 per month.

To assist recipients to become self-supporting they may be granted free hospital and medical benefits for three months after they cease being eligible for an allowance.

Needy mothers now remain eligible for assistance if they have worked an average of 120 hours per month over any period of four consecutive months starting with the month in which 120 hours were worked.

Certain categories of persons have been declared ineligible for benefits under the Family Benefits Act. These include: persons with liquid assets in excess of amounts stipulated in the Regulations; persons in mental institutions and sanatoria; recipients under the General Welfare Assistance Act, except residents of licensed nursing homes;

recipients of Old Age Security; disabled persons allowance; blind persons allowance; dependent fathers' allowance and widows' and unmarried women's allowances.

A number of changes were made in the Regulations under the General Welfare Assistance Act. Effective May 1, 1970, there was a general increase in rates bringing rates for items of basic need in line with those under the Family Benefits Act. Allowances for foster children were also increased by $5 per month making them comparable with rates under the Family Benefits Act.

Surgical supplies and dressings, and costs of moving were added to the list of items of special assistance that may be provided at the option of municipalities. Also, the maximum payable for funeral expenses in unorganized territory has been increased from $300 to $365.

Municipalities have been granted discretionary authority to extend earnings exemptions similar to those set out in the Family Benefits Act. Gross earnings from casual or part-time employment were previously considered as income with the exception of employment expenses.

Provision has been made for the payment of incentive allowances to welfare recipients participating in work activity projects approved by the Lieutenant Governor in Council and the Department of National Health and Welfare. The allowances may be paid by municipalities, councils of approved Indian bands or the province. An allowance may be paid in addition to regular assistance payments and must not be treated as income in determining eligibility for general assistance. The province will reimburse municipalities and Indian bands for 80 per cent of the cost of allowances and of the costs of administering welfare services related to the operation of work activity projects. This reimbursement is also available for costs of staff training incurred in connection with projects.

Through an amendment to the Homemakers and Nurses Services Act the monthly amount of provincial reimbursement is 80 per cent of the amount by which total monthly costs of approved services exceeds the available monthly income of the recipient. Previously reimbursement was subject to a maximum of $12 per day for eight consecutive hours of homemaker services, $1.50 per hour for up to eight hours for homemaker service provided on an hourly basis, and $4.50 per visit for the services of a nurse.

MANITOBA

General Assistance

Assistance to persons in need is provided through two programs: provincial social allowances and municipal assistance.

Social allowances are provided to mothers, the physically and mentally disabled, persons 65 years of age or over, unemployed and unemployable residents of unorganized territories, persons undertaking

academic or technical training, employed persons with dependents requiring special care, and on behalf of neglected children. Benefits are determined on the basis of budgetary amounts for food, clothing, fuel, utilities, household and personal needs, and shelter. The social allowance program is administered directly by the province through a network of eleven regional offices.

Assistance is provided by municipalities on a short-term basis to persons not covered by the provincial social allowance program. This assistance is also provided on a needs-test basis using budget scales set by each municipality. The province reimburses municipalities for expenditures for assistance under a formula set out in the Social Allowances Act.

Health Care Services

Recipients of provincial social allowances receive their medical and hospital care under the Medical Care Act and the hospital insurance program.

Additional health services including dental and optical care and prescribed drugs may be provided as required to recipients of provincial assistance. Other health services include home nursing and homemaker services, prosthetic appliances, physiotherapy, special rent or diet allowances, and transportation to obtain health care.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in paying for their care through the social allowances program. In most instances, the care is provided in voluntary and proprietary homes located throughout the province.

The institutional care program is administered primarily by Care Services, a Section of the Department of Health and Social Services which is responsible for the development, licensing and inspection of homes and for the placement of individuals requiring special care.

During the year, 84 domiciliary and nursing homes for adults with over 5,000 beds were listed as homes for special care under the Plan. Payments are based upon rates that are set for each of the homes in accordance with the level of care provided.

A comforts allowance of $12 per month is allowed socially active recipients living in institutions.

Child Care

Federal contributions are made toward the cost of caring for children that are placed in foster homes, group homes, and child care institutions under the authority of the Child Welfare Act. Payments

during the year included costs for children placed in care by the province, by the four children's aid societies in the province, and by the Jewish Child and Family Service. Payments are based upon rates determined by an advisory committee established under the Child Welfare Act.

During the year some 33 child caring institutions with a capacity of 375 beds were listed under the Plan. While most of these were group foster homes operated by children's aid societies, eight were institutions providing specialized care, such as that required by emotionally disturbed children, with a capacity of about 200 beds.

Appeals must be filed within 15 days after notice of decision has been received. The chairman of the appeal board must hold a hearing not later than 15 days after receiving the notice of appeal. The appeal board may dismiss the appeal; order the social allowance or municipal assistance revoked or discontinued; allow the appeal and specify an amount to be paid to the appellant; or, allow the appeal and vary the order or direction made by the responsible authority. Questions of law or jurisdiction may be appealed to the Court of Appeal of Manitoba.

The Child Welfare Act was amended to permit the establishment of rehabilitation centres and of a review board to provide delinquent children with the protection, help, guidance and supervision given neglected children. Another amendment to the Child Welfare Act eliminates the requirement for a judge to determine the religion of a child when determining age and residence.

Welfare Services

Federal contributions are made toward the cost of new welfare services provided by the provincial Department of Health and Social Development which administers social allowances and provides other welfare services through a network of regional offices, by municipal departments of welfare which are responsible for the administration of assistance and the provision of associated welfare services, and by four children's aid societies and a child and family service providing child care, protection and adoption services. Federal funds are also provided for fifteen voluntary welfare service agencies providing day care, counselling and other welfare services.

Significant Developments during 1970-71

The Social Allowances Act was amended to extend the coverage of provincial assistance, to amend appeal procedures and to permit the province to assume responsibility for municipal assistance if a municipality agrees.

The provincial program has been extended to cover students undertaking undergraduate academic or vocational training who have insufficient income to meet the basic needs of themselves and their dependents. Divorced mothers with dependent children are eligible for provincial assistance if they have not remarried. An unmarried

mother is eligible on the same terms as a widow. The qualifying period for mothers whose husbands have deserted or who are imprisoned has been reduced from one year to 90 days. An allowance may be paid in respect of a child temporarily placed in a foster home or institution without a transfer of guardianship.

Appeal procedures have been strengthened. The Director or the municipality concerned must now send an applicant or recipient written notice that assistance has been denied, cancelled, suspended, withheld or reduced. Information on appeal provisions must also be provided. A person may appeal if he was not allowed to apply or re-apply for assistance; his request for increased assistance or assistance was not decided upon within a reasonable time; his application was denied; assistance cancelled, suspended, varied or withheld, or if the amount of assistance granted was insufficient to meet his needs.

SASKATCHEWAN

General Assistance

Assistance for persons in need is available under the Saskatchewan Assistance Plan.

Need is established through the use of the budget deficit method. Benefits for periods exceeding three months are determined on the basis of budgetary allowances covering items of basic maintenance: food, shelter, clothing, fuel, utilities and household and personal incidentals. Benefits for short-term, emergency or interim assistance may be based on a pre-added budget or according to budgetary allowances as above. Assistance may be granted to cover items of special need such as household equipment, housekeeping allowances, and items incidental to education or commencing employment.

The Saskatchewan Assistance Plan is administered by the provincial Department of Welfare through its regional offices, except in the municipalities of Prince Albert and Moose Jaw where assistance is granted through municipal social service departments.

Health Care Services

Health care services for recipients of assistance are provided under the medical care and hospital insurance programs. Additional benefits, such as optical and dental services (including eye glasses and dentures), physiotherapy, chiropody, drugs and appliances are provided through the Medical Services Division of the Department of Health.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes, homes for unmarried mothers and other types of residential welfare institutions for adults are assisted in meeting the costs of such care through the Saskatchewan Assistance Plan. These homes are

licensed and inspected by the Department of Welfare under the Housing and Special Care Homes Act. A large proportion of such homes have been constructed in recent years with the assistance of long-term, low-interest loans under the National Housing Act and are operated by voluntary groups or municipal corporations.

During the year, there were over 115 such institutions containing a total of more than 6,000 nursing and domiciliary beds which were listed as homes for special care under the federal cost-sharing agreement. Maximum rates payable were $210 per month for supervisory and limited personal care and $310 per month for nursing care. In cases of hardship the Director of Public Assistance may waive the maximum on rates. Residents of these institutions retain a comforts allowance of $10.00 per month.

Child Care

The child care program is administered directly by the provincial Department of Welfare through its regional offices. Payments are made for maintenance, health care and other needs of children who have been placed in foster homes, group homes or child care institutions under the authority of the Child Welfare Act. Such care is provided to children who are found by the courts to be neglected and to children taken into care under agreements with their parents.

During the year 13 child caring institutions with a capacity of 206 beds were listed as homes for special care under the federal cost-sharing agreement. These institutions included receiving homes, group foster homes, hostels and treatment centres for children with behavior problems.

Welfare Services

Federal contributions are made toward the new costs of welfare services provided by the provincial Department of Welfare and the Social Service Departments of the cities of Moose Jaw and Prince Albert. In the provincial department, contributions go toward the costs of administering the Saskatchewan Assistance Plan, providing associated welfare services through regional offices and sub-offices, and the cost of providing child welfare services, including supervision of children in care, protection services, and adoptions.

Significant Developments during 1970-71

Amendments to the Saskatchewan Assistance Regulations increased food and clothing allowances and maintenance allowances for persons in homes for special care, all with effect from April 1, 1970.

Monthly food rates were increased by varying amounts depending on the age of the individual. The rate for persons 20 years of age and over is $29.15. For children the allowance ranges from $15.95 for those four years of age and under to $30.80 for children 15 to 19 years of age. Adjustments are made for family size. The monthly food

allowance for a single adult is $32, $60 for a married couple, and $84.70 for a family made up of two parents and two children under four years of age.

The maximum clothing allowance for persons 20 years of age and over was increased by $1 to $11 per month. Children's clothing rates were raised by 50 to 80 cents per month depending on the age of the child. The rates now range from $5.50 per month for children four years of age and under to $8.80 for children 15 to 19 years of age.

Monthly maintenance allowances for needy persons in licensed nursing homes and special care homes were increased from $207 to $210 for persons receiving supervisory and limited personal care and from $287 to $310 for persons receiving extensive personal and nursing care.

ALBERTA

General Assistance

Assistance for needy persons is provided through the provincial social allowance program and through the municipal social assistance program.

Social allowances are granted to persons in need because of age, physical or mental incapacity; to parents with dependent children; to persons undertaking rehabilitation; to unemployable persons, and on behalf of children in the home of a guardian.

Benefits are based upon rate schedules for food and clothing which are adjusted periodically to reflect changes in the cost of living. Allowances for shelter are paid up to levels accepted as the standard for health and decency in the community in which the recipient lives. The social allowance program is administered directly by the provincial Department of Social Development through a network of regional offices.

Municipal assistance is provided on a short-term basis to persons, usually unemployed employables, resident in the community, who do not qualify under the provincial social allowance program. Eligibility is determined through an assessment of need using provincial budgetary standards or standards set by a municipality subject to ministerial approval. The province reimburses municipalities for 80 per cent of their expenditures for assistance.

Health Care Services

Recipients receive medical and hospital coverage under the medical care and hospital insurance programs. Other health services such as dental, chiropractic and optical care are provided through a Treatment Services Card and prescription drugs are authorized through a stub attached to the monthly cheque. Health care services for voucher recipients are provided on an individual basis.

Institutional Care

Persons in need who require care in homes for the aged, nursing homes and other residential welfare institutions are assisted in meeting the cost of such care through the social allowances program. Care may be provided in provincial, municipal or voluntary homes which are licensed and supervised under the Welfare Homes Act by the Homes and Institutions Branch of the Department of Social Development or in proprietary nursing homes licensed and supervised by the Department of Health under the Nursing Homes Act. A network of senior citizens lodges, built by the province and operated by the municipalities, provides domiciliary care.

During the year about 165 homes with over 10,000 domiciliary and nursing beds for adults were listed as homes for special care under the federal cost-sharing agreement. There were over 45 contract nursing homes and 75 senior citizens lodges. Residents of these homes retain a comforts allowance of $15 per month.

Child Care

Child welfare services in Alberta are administered by the province under the Child Welfare Act. Maintenance costs are assumed by the province. Per diem rates for care in a foster home vary with the age of the child. Costs for clothing, health care and school supplies are also met by the province.

During the year, 36 child caring institutions with a capacity of 1,171 beds were listed as homes for special care under the federal cost-sharing agreement.

Welfare Services

During the year three types of welfare services were included as shareable costs under the Canada Assistance Plan Agreement: direct services provided through the regional offices of the provincial Department of Social Development, including the administration of the social allowance program and the provision of child care and family services; the administration of assistance and welfare services through municipal departments of welfare in ten major municipalities; the provision of welfare services by voluntary agencies primarily under the Preventive Social Services program. Preventive social services include day care, homemaker services, counselling, information, referral and drop-in centres, and supportive services for the aged.

Significant Developments during 1970-71

The Social Development Act came into force on July 1, 1970, replacin the Public Welfare Act. Social Allowance Regulations under the Act came into effect August 1, 1970.

Under the new legislation provincial assistance has been extended to cover a new group of unemployable persons: persons physically and mentally capable of employment who, in the opinion of the Director of Social Development, are not ready for employment or training or suited to available employment, or who are otherwise considered unemployable. Assistance may be continued beyond the age of 16 for dependents attending educational institutions.

The Act indicates services that may be provided to employable and unemployable persons. Services included are guidance in the management of personal affairs, assistance in obtaining training necessary for employment, assistance in obtaining and retaining employment, and advice and instruction in setting-up and following a rehabilitation plan. In addition an unemployable person may receive advice on the use of social allowances, assistance in obtaining vocational and other training necessary for employment suited to his particular circumstances and any other assistance required to help him become employable.

The Act provides that any person or municipality affected by a decision under the Social Development Act may seek a review by the appeal authority established by the Minister.

Provision is made in the new Act for the transfer to the provincial government of responsibilities for assistance presently assumed by the municipalities.

Social Allowance Regulations which came into effect on August 1, 1970, increased food and clothing rates and amended provisions relating to residence, allowable income, assets and assignment of property.

Basic monthly food rates are $31 for men and $27 for women. Rates for children range from $16 for children up to six years of age to $33 for children 16 to 20 years old. Monthly clothing rates are $8 for men and $9 for women. Rates range from $8 for children up to six years of age to $10 for children 12 years of age and over. The total monthly food and clothing allowance for single adults living alone has been raised from $44.20 to $46 for men, from $40.10 to $42 for women, and from $78.74 to $82 for a married couple.

Social allowances are payable only to persons domiciled in the province. In determining need, monthly income exemptions of $15 for single persons and $25 for persons with dependents may be allowed. Additional income exemptions may be provided as incentives to employable persons. Applicants for assistance are required to report transfers or assignments of real or personal property that have taken place two years (formerly five years) prior to application.

BRITISH COLUMBIA

General Assistance

Two general assistance programs are operated in the province: social allowances, and supplementary social allowances.

Social allowances are paid to any needy person requiring assistance on a short or long-term basis, except persons eligible for blind or disabled persons allowances which the province continued to grant during the year. Budgets are determined on the basis of rate scales set by the province covering food, clothing, household operation and sundry expenses, and shelter costs. The program is administered through regional and district offices of the Department of Rehabilitation and Social Improvement, except for a number of major municipalities where administration is undertaken through municipal departments of welfare.

Supplementary social allowances may be granted to recipients of Old Age Security, and blind and disabled persons allowances and are paid on the basis of need up to established income ceilings. The program is administered through the district offices of the Department of Rehabilitation and Social Improvement or municipal welfare offices.

Health Care Services

Hospital and medical care is provided to unemployable recipients under medical care and hospital insurance programs. Other services provided may include payment for prescribed drugs on the drug benefit list, glasses, and basic dental care.

Institutional Care

Needy persons who require care in homes for special care are assisted in meeting the costs of this care through the social allowances program. Care may be provided in boarding homes licensed by the Community Care Facilities Licensing Board and in "nursing homes" licensed under the Private Hospitals Act. During the year, 442 boarding homes with almost 7,500 beds and 75 nursing homes with 3,200 beds were listed as homes for special care for federal cost-sharing purposes. Maximum assistance rates paid were $150 per month for boarding home care and $280 per month for nursing home care. Residents may receive $16 per month as a comforts allowance.

Child Care

Federal contributions are made toward the cost of care provided to children who have been placed in foster homes, group homes and child care resources under the authority of the Protection of Children Act. The costs shared include maintenance payments to foster parents, which vary with the age of the child, and clothing allowances, health care services and school supplies. The child care program is administered

by Children's Aid Societies in Victoria and Vancouver and through the district offices of the Department of Rehabilitation and Social Improvement in other parts of the province.

During the year, 137 child caring institutions with a capacity of almost 1,300 beds were listed as homes for special care for federal cost-sharing purposes. These included hostels, and receiving homes, group foster homes; and hostels and centres serving neglected, disturbed, delinquent, and retarded children.

Welfare Services

Federal contributions are made toward new costs of welfare services provided through the provincial Department of Rehabilitation and Social Improvement, including costs of administering assistance and providing related child and family welfare services through a regional office structure. Contributions are also made for the costs of administering assistance and providing services through municipal welfare departments and of providing adoption, protection and other child welfare services through the three Children's Aid Societies located in Victoria and Vancouver. A number of voluntary agencies provide counselling services, day care, and supportive services.

Significant Developments during 1970-71

Effective April 1, 1970, the maximum monthly social allowance was increased by $5 per person. The maximum social allowance payable to spouses of recipients of Old Age Security or blind or disabled persons allowances was also raised by $5 to $62.50 per month.

Maximum monthly budget limits for recipients of Old Age Security and the Guaranteed Income Supplement were increased to $150.00 for single persons and to $270.00 for married couples effective April 1, 1970; and to $152.50 and $274.40 respectively, effective January 1, 1971. Effective April 1, 1970, maximum monthly supplementary social allowance payments to such pensioners were increased to $38.60 single, and to $23.60 each if married and both spouses eligible.

For persons in receipt of a supplementary social allowance and a blind or disabled persons allowance, the maximum allowable monthly budget was raised from $139.20 to $150 for a single person and to $270 for a married couple when both are eligible for a categorical allowance. This increase also had effect from April 1, 1970.

A recipient of a blind or disabled persons allowance may be granted a comforts allowance of up to $16 per month, depending on need, if he is being cared for at the maximum boarding home rate and has no other income than the allowance and supplementary social assistance.

With effect from April 1, 1970, an earnings exemption of $100 per month was authorized for deserted or widowed mothers with children, mothers with incapacitated husbands and single incapacitated unemployable

persons. Recipients of disabled persons allowances may also be granted this exemption if they consent to be transferred to the social assistance program for the duration of employment. When employment ceases payments will be resumed under the Disabled Persons Act.

YUKON TERRITORY

General Assistance

General assistance is provided under the terms of the Social Assistance Ordinance and the Social Assistance Regulations. This legislation is administered by the Director of Social Welfare who may make provision for the granting of assistance and welfare services to any person in need residing in the Territory or to any person in need residing outside the Territory in accordance with an arrangement approved by the Director.

Benefits are determined on the basis of budgetary allowances set by Regulation to cover food, clothing, boarding care, rent, utilities, an allowance for homeowners, and incidental allowances to cover personal care and household maintenance. Assistance for items of special need such as special clothing, telephone, travel, rehabilitation, housekeeping and laundry allowances, and burial expenses may be granted with the approval of the Director of Social Welfare or an officer of the Department of Social Welfare designated by him. Supplementary allowances may be granted on the basis of need to recipients of Old Age Security, Blind Persons Allowances, Disabled Persons Allowances or other statutory allowances.

Health Care Services

The Social Assistance Regulations provide for the granting of aid to cover services which are not provided under the Yukon Hospital Insurance Services Ordinance. Such services may include medical, surgical, obstetrical, optical, dental and nursing services, drugs, dressings and prosthetic appliances.

Institutional Care

Assistance up to a maximum of $450 per month may be paid on behalf of persons in need who require extensive personal or nursing care in a public or private nursing home or home for special care. If the recipient of assistance is in receipt of an allowance or pension, he is required to contribute to the cost of his care in an amount considered reasonable by the Director of Social Welfare. Residents of homes may retain a comforts allowance of up to $20 per month.

Six institutions providing nursing or domiciliary care for adults and having a total of 124 beds have been listed as homes for special care under the federal cost-sharing agreement.

Child Care

Federal contributions are being made toward the costs of maintaining children placed in foster homes and child care institutions under the authority of the Child Welfare Ordinance. Four children's institutions with a capacity of 59 beds are listed under the federal cost-sharing agreement.

Welfare Services

The Director of Social Welfare may arrange for the provision of welfare services to persons in need or to persons who are likely to become persons in need unless such services are provided.

Federal contributions are being made toward new costs of welfare services provided by the Department of Social Welfare, including costs of administering the general welfare assistance program and of providing child care, protection and adoption services.

Soins à l'enfance

Le gouvernement fédéral contribue à l'entretien des enfants placés en foyers nourriciers et dans des établissements de soins à l'enfance, en vertu de la Child Welfare Ordinance. Quatre établissements pour enfants, pouvant contenir 59 lits, figurent sur la liste des établissements qui bénéficient de l'accord fédéral sur les frais partagés.

Services de bien-être social

Le directeur de bien-être social peut prendre des dispositions pour dispenser des services de bien-être social aux nécessiteux, ou à ceux qui risquent de le devenir s'ils ne reçoivent pas de tels services.

Le gouvernement fédéral participe au paiement des nouveaux frais relatifs aux services de bien-être social qui sont dispensés par le ministère du Bien-être social, y compris les frais d'administration du programme d'assistance générale de bien-être social et ceux des soins à l'enfance, des services de protection et d'adoption.

TERRITOIRE DU YUKON

Assistance générale

L'assistance générale est fournie en vertu de la Social Assistance Ordinance et des Social Assistance Regulations, sous la responsabilité administrative du directeur du bien-être social qui a le pouvoir d'accorder de l'assistance et des services de bien-être social à toute personne dans le besoin qui vit sur le territoire, ou même qui vit en dehors du territoire, sous réserve d'un arrangement approuvé par le directeur.

Le montant des prestations est calculé à partir des dépenses dont on peut tenir compte en vertu du Règlement en ce qui a trait à la nourriture, à l'habillement, aux frais de pension, au loyer et aux services d'utilité publique; le Règlement accorde aussi une allocation aux assistés sociaux qui sont propriétaires de leur maison, ainsi qu'une allocation accessoire qui permet de pourvoir aux soins personnels et à l'entretien du foyer. Dans des cas particuliers, par exemple, lorsqu'il faut des vêtements spéciaux, ou en matière de téléphones ou de déplacements nécessaires, de réadaptation, d'entretien ménager, de blanchissage ou de frais funéraires, une assistance spéciale peut être accordée avec l'assentiment du directeur du bien-être social qu'il a désigné. Des allocations supplémentaires peuvent être accordées, selon les besoins, aux bénéficiaires de la pension de la sécurité de la vieillesse, des allocations aux aveugles, aux invalides, ou d'autres allocations statutaires.

Services de soins médicaux

Le Règlement de l'assistance sociale prévoit une aide en vue d'obtenir les services non compris dans la Yukon Hospital Insurance Services Ordinance. Ces services peuvent comprendre les soins médicaux, chirurgicaux, obstétriques, ophtalmologiques, dentaires et infirmiers de même que le coût des médicaments, des pansements et des prothèses.

Soins en établissement

Une aide mensuelle maximale de $450 peut être apportée aux nécessiteux qui ont besoin de soins infirmiers ou de soins intensifs personnels, soit dans un foyer privé ou public de soins de garde, soit dans un établissement de soins spéciaux. Lorsque l'assisté social reçoit une allocation ou une pension, il doit contribuer à son entretien, dans la mesure que le directeur du bien-être social jugera raisonnable. Les pensionnaires de ces établissements peuvent obtenir une allocation de $20 par mois pour leurs menues dépenses.

Six établissements, disposant d'un total de 124 lits, dispensent des soins infirmiers ou de garde aux adultes et figurent sur la liste de foyers pour soins spéciaux, en vertu de l'accord fédéral sur les frais partagés.

bureaux municipaux de bien-être social, ainsi qu'aux frais relatifs aux services d'adoption et de protection et à d'autres services de bien-être à l'enfance dispensés par trois sociétés d'aide à l'enfance, situées à Victoria et à Vancouver. Un certain nombre d'organismes bénévoles fournissent des services de counselling, de soins de jour et de soutien.

Réalisations importantes en 1970-1971

Le supplément mensuel maximal d'allocations sociales a été augmenté de $5 par personne, à compter du 1er avril 1970. Le supplément maximal d'allocations sociales payables aux épouses des bénéficiaires de la pension de la sécurité de la vieillesse ou des allocations aux aveugles ou aux invalides, a aussi été augmenté de $5 pour atteindre $62.50 par mois.

La limite budgétaire mensuelle et maximale pour les bénéficiaires de la pension de la sécurité de la vieillesse et le supplément de revenu garanti, a été portée à $150.00 pour les personnes seules, et à $270.00 pour les couples mariés, à compter du 1er avril 1970; et à $152.50 et $274.40 respectivement, à compter du 1er janvier 1971. A compter du 1er avril 1970, le supplément maximal mensuel d'allocations sociales payables à ces pensionnés a été porté à $38.60 pour les personnes seules et à $23.60 chacun, pour les couples mariés où l'homme et la femme sont tous les deux admissibles.

Pour les personnes qui reçoivent une allocation sociale supplémentaire et pour les bénéficiaires d'allocations aux aveugles ou aux invalides, le supplément maximal mensuel d'allocations sociales a été porté de $139.20 à $150, pour les personnes seules, et à $270, pour un couple marié, lorsque l'homme et la femme sont tous les deux admissibles à l'allocation spéciale. Cette majoration est entrée en vigueur, elle aussi, le 1er avril 1970.

Le bénéficiaire d'une allocation aux aveugles ou aux invalides peut aussi recevoir une allocation pour ses menues dépenses qui peut atteindre $16 par mois, selon les besoins, s'il se fait soigner au taux maximal des foyers de soins de garde et ne possède pas d'autre revenu que l'allocation et l'assistance sociale supplémentaire.

A compter du 1er avril 1970, une exemption mensuelle de $100 sur les gains a été autorisée pour les mères abandonnées ou les veuves ayant des enfants à charge, les mères dont les maris sont invalides, et les célibataires invalides et inaptes au travail. On peut aussi accorder cette exemption aux bénéficiaires des allocations aux invalides, s'ils consentent à se faire transférer au régime d'assistance sociale pendant la durée de leur emploi. Lorsque l'emploi cesse, les versements recommenceront en vertu de la Disabled Persons Act.

Services de soins médicaux

Les services médicaux et hospitaliers sont fournis aux assistés en vertu des régimes d'assurance-hospitalisation et d'assurance médicale. D'autres services dispensés comprennent le paiement de médicaments vendus sur ordonnance et figurant sur la liste de médicaments, de lunettes, ainsi que les soins dentaires essentiels.

Soins en établissement

Grâce au régime des allocations sociales, on aide les personnes nécessiteuses qui doivent se faire soigner dans les foyers de soins spéciaux, à payer leurs soins. Ceux-ci peuvent être dispensés dans des pensions autorisées par la Welfare Institutions Licensing Board et dans des foyers de soins de garde autorisés en vertu de la Private Hospitals Act. Au cours de l'année, 442 foyers de pension, disposant de près de 7,500 lits, et 75 foyers de soins de garde, disposant de 3,200 lits, figuraient sur la liste des soins spéciaux aux termes de l'accord fédéral sur le partage des coûts. Les taux maximaux d'assistance s'élevaient à $150 par mois, pour les soins en foyer de pension et à $280 par mois pour les soins en foyer de soins infirmiers. Les résidents ont droit à $16 par mois pour leurs menues dépenses.

Soins à l'enfance

Le gouvernement fédéral a partagé le coût des soins dispensés aux enfants placés dans des foyers nourriciers, dans des foyers collectifs et dans des établissements de soins pour enfants, en vertu de la Protection of Children Act. Parmi les coûts partagés, on compte le paiement aux parents nourriciers de frais d'entretien des enfants, frais qui varient selon l'âge, et les allocations pour l'habillement, les soins médicaux et les fournitures scolaires. Le programme de soins à l'enfance est administré par des sociétés d'aide à l'enfance et par les bureaux de district du ministère du Bien-être social, dans les autres régions de la province.

Au cours de l'année, 137 établissements de soins pour enfants, disposant d'environ 1,300 lits, figuraient sur la liste des foyers de soins spéciaux aux termes de l'accord fédéral sur le partage de coûts. Cette liste comprenait les pensions et les foyers d'accueil, les foyers nourriciers collectifs, les centres de traitement des délinquants, ainsi que les centres et pensions pour arriérés mentaux.

Services de bien-être social

Le gouvernement fédéral contribue au paiement des nouveaux frais des Services de bien-être social dispensés par l'entremise du ministère provincial du Bien-être social. Ces frais comprennent les frais d'administration engagés relativement aux allocations sociales et aux allocations sociales supplémentaires, ainsi que la prestation de services de bien-être social aux enfants et à la famille grâce à un ensemble de bureaux régionaux. Les contributions fédérales s'appliquent également aux frais d'administration de l'assistance et à la prestation de services par les

Les Social Allowance Regulations qui sont entrées en vigueur le 1er août 1970 ont augmenté les taux relatifs à la nourriture et à l'habillement et ont modifié les dispositions qui ont trait au logement, au revenu autorisé, aux disponibilités et à la cession de biens.

Les taux mensuels de base pour la nourriture s'élèvent à $31, pour les hommes, et à $27, pour les femmes. Les taux pour les enfants s'échelonnent de $16, pour les enfants âgés de 6 ans ou moins à $33, pour les enfants âgés de 16 à 20 ans. Les taux mensuels pour l'habillement s'élèvent à $8, pour les hommes, et à $9, pour les femmes. Les taux s'élèvent à $8, pour les enfants de 6 ans ou moins et à $10, pour les enfants de 12 ans et plus. L'allocation mensuelle totale pour la nourriture et pour l'habillement en faveur des adultes qui résident seuls a été portée de $44.20 à $46, pour les hommes de $40.10 à $42, pour les femmes et de $78.74 à $82, pour les couples mariés.

Les allocations sociales ne sont payables qu'aux personnes qui résident dans la province. En déterminant les besoins, des exemptions mensuelles sur le revenu de $15, pour les personnes seules et de $25, pour les chargés de famille, peuvent être autorisées. Des exemptions supplémentaires sur le revenu peuvent être accordées comme primes d'encouragement aux personnes aptes au travail. On exige des personnes qui demandent de l'assistance de rendre compte de leur transferts ou de leurs cessions de biens réels ou personnels qui ont eu lieu 2 ans (autrefois 5 ans) avant la demande.

COLOMBIE-BRITANNIQUE

Assistance générale

La province administre deux régimes d'assistance générale: le régime des allocations sociales et le régime des allocations sociales supplémentaires.

On verse des allocations sociales à toute personne nécessiteuse qui, à l'exclusion des personnes admissibles aux allocations aux aveugles ou aux invalides, a besoin d'une assistance de longue durée; la province a continué d'accorder les allocations aux aveugles et aux invalides pendant l'année. Les allocations seront établies suivant des tarifs fixés par la province relativement à la nourriture, à l'habillement, à l'entretien ménager et aux dépenses diverses ainsi qu'au logement. Ce régime est administré par les bureaux régionaux et de district du ministère du Bien-être social, excepté dans certaines municipalités importantes où les services municipaux de Bien-être social en sont chargés.

Des allocations sociales supplémentaires peuvent être versées aux bénéficiaires de la pension de la sécurité de la vieillesse, des allocations aux aveugles et aux invalides; elles sont déterminées selon les besoins jusqu'à certains plafonds de revenu. Le régime est administré par les bureaux du district du ministère du Bien-être social ou par les services municipaux de Bien-être social.

Services de bien-être social

Il y avait trois genres de services de bien-être social dont les frais étaient partagés, pendant l'année, en vertu du Régime d'assistance publiqu du Canada: les services directement dispensés par des bureaux régionaux du ministère provincial du développement social, y compris l'administratic des Régimes d'allocations sociales et d'assistance sociale et la prestation de soins aux enfants et de services à la famille; les services d'assistance et de bien-être social assurés par l'entremise des services municipaux de bien-être social dans dix municipalités des plus importantes; et les services octroyés par les organismes bénévoles, surtout en vertu du programme de services sociaux préventifs (Preventive Social Services Program). Les services sociaux préventifs comprennent les soins de jour, les services d'auxiliaires familiales, les services de counseling, les services d'information, d'orientation, les centres d'accueil et les services de soutien en faveur des personnes âgées.

Réalisations importantes en 1970-1971

La Social Development Act, entrée en vigueur le 1er juillet 1970, remplace la Public Welfare Act. Les Social Allowance Regulations qui découlent de cette loi ont pris effet le 1er août 1970.

Aux termes de la nouvelle Loi, l'assistance provinciale a été développée en vue de protéger un nouveau groupe de chômeurs: les personnes physiquement et mentalement aptes à l'emploi qui, de l'avis du directeur du développement social, ne sont pas prêtes à être employées ou formées ou qui ne sont pas aptes à l'emploi disponible, ou qui sont autrement tenues pour inaptes au travail. L'assistance peut être fournie au delà de l'âge de 16 ans pour les enfants à charge qui sont aux études.

La Loi prévoit les services qui peuvent être assurés aux personnes aptes et inaptes au travail. Les services dont il s'agit sont l'orientation dans la gestion des affaires personnelles, l'assistance en vue d'obtenir la formation nécessaire à l'emploi, l'assistance nécessaire pour obtenir et pour garder un emploi, les conseils et les instructions nécessaires pour élaborer et pour poursuivre un plan de réadaptation. De plus, la personne inapte au travail peut bénéficier des services de consultation sur les allocations sociales, de l'assistance en vue d'obtenir une formation professionnelle ou une autre formation nécessaire à l'emploi qui lui convient en particulier et toute autre assistance nécessaire qui peut l'aider à obtenir un emploi.

La Loi prévoit que toute personne ou municipalité qui se croit lésée par une décision en vertu de la Social Development Act peut exiger une révision en vertu du droit d'appel établi par le ministre.

La nouvelle loi prévoit le transfert au gouvernement provincial des responsabilités de l'assistance qu'assument actuellement les municipalités.

fixées par les municipalités et qui doivent être approuvées par le ministère. La province rembourse aux municipalités 80 p. 100 des dépenses engagées dans le domaine de l'assistance.

Services de soins médicaux

Les assistés sociaux ont droit aux services médicaux et hospitaliers, en vertu des régimes d'assurance-hospitalisation et d'assurance médicale. Les autres soins médicaux, tels que les soins dentaires, ophtalmologiques et de chiropraxie, sont obtenus sur présentation d'une "carte de soins" et les médicaments vendus sur ordonnance sont autorisés par une note jointe au talon du chèque mensuel. Les soins médicaux en faveur des bénéficiaires qui reçoivent de l'assistance sous forme de bons d'achat, sont fournis en fonction des besoins individuels.

Soins en établissement

Grâce au régime des allocations sociales, on aide les personnes nécessiteuses, qui doivent se faire soigner dans des foyers pour vieillards, dans des foyers de soins de garde et dans d'autres établissements de bien-être social, à en payer les dépenses. Les soins peuvent être dispensés dans des foyers provinciaux, municipaux ou privés qui sont autorisés et surveillés, conformément à la Welfare Homes Act, par la Direction des foyers et des établissements (Homes and Institutions Branch) du ministère du Développement social; ces soins sont également fournis dans des foyers de soins de garde privés autorisés et surveillés par le ministère de la Santé, aux termes de la Nursing Homes Act. Un réseau de foyers pour vieillards, construits par la province et administrés par les municipalités, dispense des soins de garde.

Au cours de l'année, près de 165 foyers, disposant de plus de 10,000 lits de soins de garde et de soins infirmiers pour adultes, figuraient sur les listes de foyers de soins spéciaux dressées aux termes de l'accord fédéral sur les frais partagés. On comptait plus de 75 foyers de soins de garde, liés par contrat, et 75 foyers pour vieillards. Les personnes qui y résident ont droit à une allocation de menues dépenses de $15 par mois.

Soins à l'enfance

En Alberta, les services de bien-être à l'enfance sont administrés par la province, en vertu de la Child Welfare Act. L'ensemble des frais d'entretien incombe à la province. Le taux quotidien des soins de garde dans un foyer nourricier varie selon l'âge de l'enfant. La province paie également les vêtements, les soins médicaux et les fournitures scolaires.

Pendant l'année, 36 établissements de soins pour enfants, disposant de 1,171 lits, figuraient sur la liste des foyers de soins spéciaux, en vertu de l'accord fédéral sur les frais partagés.

des foyers de soins spéciaux; ces modifications sont entrées en vigueur le 1er avril 1970.

Les taux mensuels pour la nourriture ont fait l'objet d'augmentations diverses selon l'âge de la personne. Le taux pour les personnes de 20 ans et plus est de $29.15. L'allocation pour les enfants s'échelonne de $15.95, pour ceux de quatre ans et moins, à $30.80, pour les enfants de 15 à 19 ans. On adapte ces montants selon la taille de la famille. L'allocation mensuelle pour la nourriture en faveur d'une personne seule s'élève à $32, à $60 pour les personnes mariées, et à $84.70 pour une famille de quatre comprenant deux enfants âgés de moins de quatre ans.

Le montant maximal de l'allocation pour l'habillement en faveur des personnes de 20 ans et plus a été porté à $11 par mois, soit $1 de plus. Les taux relatifs à l'habillement des enfants ont été portés de 50 à 80 cents par mois, selon l'âge de l'enfant. Les taux s'échelonnent maintenant de $5.50 par mois, pour les enfants de quatre ans et moins, à $8.80, pour les enfants de 15 à 19 ans.

Les allocations mensuelles pour l'entretien des personnes nécessiteuses, qui résident dans des foyers de soins infirmiers et de soins spéciaux autorisés, ont été portées de $207 à $210 pour les personnes qui reçoivent des services de surveillance et des services de soins personnels restreints, et de $287 à $310, pour les personnes qui reçoivent des soins personnels et infirmiers intensifs.

ALBERTA

Assistance générale

L'assistance publique générale est fournie grâce au régime d'allocations sociales de la province et au régime municipal d'assistance.

Les allocations sociales sont accordées aux personnes que l'âge, l'incapacité physique ou mentale rendent nécessiteuses, aux parents qui ont des enfants à charge, aux personnes en voie de réadaptation, aux personnes qui ne peuvent être employées et en faveur des enfants gardés en tutelle.

Les prestations sont établies pour la nourriture et l'habillement, selon des barèmes indexés sur l'indice du coût de la vie. Les allocations pour le logement sont conformes aux normes qui, dans la localité où demeure le bénéficiaire, sont jugées convenables et favorables à la santé. Le régime des allocations sociales est administré directement par le ministère provincial du Développement social par l'entremise d'un réseau de bureaux régionaux.

Les municipalités accordent une assistance de courte durée aux personnes, en général aux chômeurs aptes au travail, qui, résidant dans la localité en cause, ne sont pas admissibles au régime provincial des allocations sociales. L'admissibilité du requérant est déterminée à la suite d'une évaluation des besoins basée sur des normes budgétaires

d'autres genres d'établissements de bien-être social pour adultes, à subvenir à ces frais. Ces foyers sont autorisés et inspectés par le ministère du Bien-être social, aux termes de la Housing and Special Care Homes Act. Un grand nombre de ces foyers ont été construits au cours des dernières années, grâce aux prêts à long terme et à faible intérêt, accordés en vertu de la Loi nationale sur l'habitation, et sont administrés par des groupements bénévoles ou par des sociétés municipales.

Au cours de l'année, plus de 115 établissements de cette nature, disposant d'un total de plus de 6,000 lits de soins infirmiers et de soins de garde, figuraient sur la liste de foyers de soins spéciaux dressée aux termes de l'accord fédéral sur le partage des coûts. Les taux maximaux payables étaient de $210 par mois pour les soins de surveillance et de soins personnels restreints et de $310 par mois pour les soins infirmiers. Le directeur de l'assistance publique, dans les cas de misère, peut passer outre aux taux maximaux. Les personnes qui résident dans ces établissements ont droit à une allocation de menues dépenses de $10 par mois.

Soins à l'enfance

Le régime de soins de garde pour enfants est administré directement par le ministère provincial du Bien-être social par l'entremise de ses bureaux régionaux. Les paiements comprennent les frais d'entretien, les soins médicaux et d'autres besoins des enfants qui ont été confiés à des foyers nourriciers, à des foyers collectifs ou à des établissements de soins pour enfants aux termes de la Child Welfare Act. Ces soins sont dispensés aux enfants qui, de l'avis des tribunaux, manquent de soins, ainsi qu'aux enfants pris en charge en vertu d'une entente avec les parents.

Pendant l'année, 13 établissements de soins pour enfants, disposant de 206 lits, figuraient sur la liste des foyers de soins spéciaux, en vertu de l'accord fédéral sur les frais partagés. Ces établissements comprennent des foyers d'accueil, des foyers nourriciers collectifs, des pensions et des centres de traitement pour les enfants souffrant de troubles du comportement.

Services de bien-être social

Le gouvernement fédéral partage les nouveaux coûts des services dispensés par le ministère provincial de Bien-être social et par les départements de Service social des municipalités de Moose-Jaw et de Prince-Albert. Les contributions versées au ministère provincial aident à supporter le coût de l'administration du régime d'assistance de la Saskatchewan, des services connexes de bien-être social, dispensés par l'entremise de bureaux régionaux et auxiliaires, et des services de bien-être à l'enfance, y compris les services de surveillance des enfants en tutelle, les services de protection et les services d'adoption.

Réalisations importantes en 1970-1971

Les modifications apportées aux Saskatchewan Assistance Regulations ont augmenté les allocations pour la nourriture et pour l'habillement ainsi que les allocations d'entretien en faveur des personnes qui résident dans

Les procédures d'appel ont été renforcées. Le directeur ou la municipalité en cause doit maintenant adresser aux requérants ou aux bénéficiaires un avis écrit selon lequel l'assistance a été refusée, supprimée, suspendue, retenue ou réduite. Les renseignements sur les dispositions de l'appel doivent aussi être fournis. Une personne peut interjeter appel si on ne lui a pas permis de s'inscrire ou de s'inscrire de nouveau en vue de l'assistance requise; si la demande d'assistance supplémentaire ou d'assistance n'a pas été traitée dans un délai raisonnable; si la demande a été refusée; si l'assistance a été supprimée, suspendue, changée ou retenue, ou si le montant de l'assistance accordée ne lui permet pas de satisfaire ses besoins.

SASKATCHEWAN

Assistance générale

L'assistance générale est fournie grâce au Saskatchewan Assistance Plan.

Les besoins sont déterminés grâce à l'utilisation de la méthode du budget déficitaire. Les prestations pour les périodes de plus de trois mois sont établies d'après des allocations budgétaires pour les frais d'entretien essentiels: la nourriture, le logement, l'habillement, le chauffage, les services d'utilité publique et les besoins ménagers et personnels. Les prestations d'assistance de courte durée, d'urgence ou provisoire peuvent se fonder sur un budget préétabli ou sur les allocations budgétaires précitées. On prevoit aussi la prestation d'une assistance pour une gamme de besoins spéciaux, tels que l'équipement ménager, les allocations d'entretien ménager et certains articles indispensables à la poursuite des études ou à l'obtention d'un emploi.

Excepté dans les municipalités de Prince-Albert et de Moose-Jaw, où ce sont les services municipaux de bien-être social qui accordent l'assistance, c'est le ministère provincial du Bien-être social qui administre le régime d'assistance publique de la Saskatchewan, par l'entremise de ses bureaux régionaux.

Services de soins médicaux

Les services de soins médicaux sont fournis aux assistés sociaux en vertu des Régimes de l'assurance-hospitalisation et de l'assurance médicale. Des prestations supplémentaires telles que les soins ophtalmologiques et dentaires (y compris la fourniture de lunettes et de dentiers), la physiothérapie, les soins de pédicure, les médicaments et certains appareils, sont fournies par l'entremise de la Division des services médicaux du ministère de la Santé.

Soins en établissement

Le régime d'assistance de la Saskatchewan aide les personnes nécessiteuses, qui ont besoin de soins dans des foyers pour vieillards, des foyers de soins de garde, des foyers pour mères célibataires et

Les appels doivent être interjetés dans les 15 jours qui suivent la réception de l'avis de la décision. Le président de la Commission d'appel doit tenir une audition dans les 15 jours qui suivent la réception de l'avis d'appel. La Commission d'appel peut rejeter l'appel; ordonner que l'allocation sociale ou l'assistance municipale soit révoquée ou discontinuée; accepter l'appel et préciser le montant qui doit être payé à l'appelant; ou, accepter l'appel et modifier l'ordonnance ou la directive de l'autorité responsable. Les questions touchant la loi ou la juridiction peuvent être présentées à la Cour d'appel du Manitoba.

La Child Welfare Act a été modifiée en vue de permettre l'établissement de centres de réhabilitation et d'un comité de révision destinés à fournir aux enfants délinquants la protection, l'assistance, l'orientation et la surveillance accordées aux enfants négligés. Une autre modification à la Child Welfare Act supprime l'exigence selon laquelle il fallait qu'un juge détermine la religion d'un enfant lorsqu'il établissait son âge et son domicile.

Services de bien-être social

Les contributions fédérales visent les nouveaux services de bien-être social fournis par le ministère provincial de la Santé et des Services sociaux qui administre les allocations sociales et dispense d'autres services de bien-être social par l'entremise d'un réseau de bureaux régionaux; par les services municipaux de bien-être social qui sont chargés de l'administration de l'assistance et de la prestation de services connexes de bien-être social; et par quatre sociétés d'aide à l'enfance qui fournissent des services de soins à l'enfance, de protection et d'adoption. Le gouvernement fédéral accorde aussi des subventions à quinze organismes bénévoles de bien-être social qui dispensent des services de soins de jour, de consultation et autres.

Réalisations importantes en 1970-1971

La Social Allowances Act a été modifiée en vue d'étendre l'assistance provinciale, de changer les procédures d'appel et de permettre à la province de se charger de l'assistance municipale, si la municipalité en cause y consent.

Le régime provincial a été élargi en vue d'aider les étudiants poursuivant une formation scolaire ou professionnelle, mais qui n'ont pas un revenu suffisant pour subvenir à leurs besoins essentiels et à ceux de leurs personnes à charges. Les mères divorcées ayant des enfants à charge sont admissibles à l'assistance provinciale si elles ne se sont pas encore remariées. Une mère célibataire est admissible aux mêmes conditions qu'une veuve. La période d'attente pour les mères qui ont été abandonnées ou dont les maris sont incarcérés, a été réduite d'un an à 90 jours. Une allocation peut être versée pour un enfant provisoirement placé dans un foyer nourricier ou un établissement sans transfert de tutelle.

D'autres services ayant trait à la santé, y compris les soins dentaires et ophtalmologiques et les médicaments vendus sur ordonnance, peuvent être fournis, selon les besoins, aux assistés sociaux.

D'autres services comprennent les soins infirmiers à domicile et les services d'auxiliaires familiales, les prothèses, la physiothérapie, les allocations spéciales pour le loyer ou les régimes alimentaires et le transport en vue d'obtenir des soins.

Soins en établissement

En vertu du régime des allocations sociales, les personnes nécessiteuses qui ont besoin de soins dans des foyers de vieillards, dans des foyers de soins de garde et dans d'autres établissements de bien-être social, reçoivent une aide financière à cette fin. Dans la plupart des cas, ces soins sont fournis dans des foyers privés, administrés par des organismes bénévoles et situés dans diverses parties de la province.

Le régime des soins en établissement est administré surtout par les Services de soins de garde, Division du ministère de la Santé et des Services sociaux. Cet organisme est chargé d'établir les loyers, de leur accorder le permis nécessaire et de les inspecter ainsi que d'y placer les personnes qui ont besoin de soins spéciaux.

Au cours de l'année, 84 foyers de soins de garde, et de soins infirmiers pour adultes, disposant de plus de 5,000 lits, figuraient sur la liste des foyers de soins spéciaux dressée en vertu du Régime. Les paiements se fondent sur des taux fixés pour chacun des foyers conformément au niveau des soins fournis.

Une allocation de menues dépenses, s'élevant à $12 par mois est accordée aux assistés sociaux des établissements qui ont une vie sociale.

Soins à l'enfance

Le gouvernement fédéral partage les frais d'entretien des enfants placés dans des foyers nourriciers, dans des foyers collectifs et dans des établissements de soins pour enfants, aux termes de la Child Welfare Act. Les versements effectués pendant l'année s'appliquent aux frais engagés relativement aux enfants placés par la province, par les quatre sociétés d'aide à l'enfance de la province et par le Jewish Child and Family Service. Ces versements se fondent sur des taux déterminés par un comité consultatif établi aux termes du Child Welfare Act.

Pendant l'année, quelque 33 établissements de soins aux enfants, disposant de 375 lits, figuraient sur la liste dressée en vertu du Régime. Bien que, dans la plupart des cas, il s'agisse de foyers nourriciers collectifs dirigés par des sociétés d'aide à l'enfance, la liste comptait également huit centres de traitement, disposant d'environ 200 lits, qui fournissaient des soins spéciaux, tels que les soins aux enfants souffrant de troubles affectifs.

On a prévu le versement d'allocations d'encouragement aux assistés sociaux qui participent aux projets d'adaptation au travail approuvés par le lieutenant-gouverneur en Conseil et le ministère de la Santé nationale et du Bien-être social. Les municipalités, les Conseils des bandes indiennes approuvées ou la province sont tenus de verser les prestations. Une allocation peut être versée en plus des paiements d'assistance courants et ne doit pas être traitée comme un revenu, lorsqu'on détermine l'admissibilité à l'assistance générale. La province remboursera les municipalités et les bandes indiennes à raison de 80 p. 100 du coût des allocations et du coût d'administration du service de bien-être social qui ont trait à l'exécution des projets d'adaptation au travail. Ce remboursement peut aussi être effectué pour les dépenses qui ont trait à la formation du personnel engagé pour les projets.

Grâce à une modification apportée à la Homemakers and Nurses Services Act, le montant mensuel du remboursement provincial s'élève à 80 p. 100 du montant par lequel les frais pour les services en question excèdent le revenu mensuel de l'assisté social. Le remboursement était auparavant assujetti à un maximum de $12 par jour pour huit heures consécutives de services de soins à domicile, de $1.50 l'heure pour huit heures de services de soins à domicile dispensés en heures, et de $4.50 par visite pour les services d'une infirmière.

MANITOBA

Assistance générale

L'assistance générale est fournie grâce à deux régimes: le régime des allocations sociales provinciales et le régime de l'assistance sociale municipale.

Les allocations sociales sont accordées aux mères nécessiteuses, aux personnes invalides physiquement ou mentalement, aux personnes de 65 ans et plus, aux chômeurs et aux personnes inaptes au travail des territoires non organisés, aux personnes qui poursuivent une formation scolaire ou technique, aux employés avec des personnes à charge qui exigent des soins spéciaux, et en faveur des enfants négligés. Les prestations sont versées sous forme d'allocations de nourriture, d'habillement, de chauffage, de services d'utilité publique, de besoins ménagers et personnels et de logement. Le régime des allocations sociales est administré directement par la province, grâce à un réseau de onze bureaux régionaux.

Les municipalités fournissent une assistance à court terme aux personnes qui ne sont pas admissibles au régime des allocations sociales provinciales. Cette assistance est aussi dispensée sur évaluation des besoins; le montant de l'aide est en fonction des normes budgétaires fixées par chaque municipalité. La province rembourse aux municipalités, selon une formule prévue dans la Social Allowance Act, les dépenses qu'elles font pour l'assistance sociale.

Les assistés sociaux reçoivent les soins médicaux et hospitaliers en vertu de la Medical Care Act et du régime d'assurance-hospitalisation.

Les allocations mensuelles maximales pour les enfants en foyer nourricier ont été portées à $50, soit une augmentation de $5, pour le premier enfant, à $45, pour le second, et à $35, pour chaque enfant supplémentaire.

L'allocation de déplacement ou de transport pour une personne aveugle ou invalide, qui exige un fauteuil roulant lorsqu'elle se déplace, a été portée de $10 à $30 par mois. L'allocation pour tous les autres invalides a été portée de $10 à $15 par mois.

Pour aider les assistés à payer leurs frais, il se peut qu'on leur accorde des prestations médicales et hospitalières gratuites pendant trois mois après qu'ils auront cessé d'être admissibles à une allocation.

Les mères nécessiteuses demeurent à présent admissibles à l'assistance lorsque leur moyenne mensuelle d'heures de travail ne dépasse pas 120 heures pour une période de 4 mois consécutifs à compter du mois pendant lequel elles ont travaillé 120 heures.

Certaines catégories de personnes ont été déclarées inadmissibles aux prestations, en vertu de la Family Benefits Act. Celles-ci comprennent: les personnes qui ont des disponibilités d'un montant supérieur à celui que prévoit le Règlement; les personnes dans les établissements psychiatriques et les sanatoriums, les bénéficiaires aux termes de la General Welfare Assistance Act, excepté les personnes qui résident dans des foyers de soins infirmiers autorisés; les bénéficiaires de la pension de vieillesse; les bénéficiaires de l'allocation aux infirmes; les bénéficiaires de l'allocation aux aveugles; les bénéficiaires de l'allocation relative aux pères à charge, et des allocations aux veuves et aux femmes célibataires.

On a effectué un certain nombre de changements au Règlement d'application de la General Welfare Assistance Act. A compter du 1er mai 1970, une augmentation générale des taux a eu lieu, ce qui a eu pour effet d'harmoniser les taux pour les articles indispensables avec ceux qui existent aux termes de la Family Benefits Act. Les allocations pour enfants en foyer nourricier ont aussi été augmentées de $5 par mois, ce qui les rend comparables aux taux établis aux termes de la Family Benefits Act.

Les fournitures et les pansements chirurgicaux, et les frais de déplacement ont été ajoutés à la liste des articles d'assistance spéciale qui peuvent être dispensés au choix des municipalités. De plus, le montant maximal destiné à payer les frais des funérailles en territoire non organisé a été porté de $300 à $365.

On a accordé aux municipalités le pouvoir discrétionnaire d'accorder des exemptions sur le revenu comparables à celles qui sont établies dans la Family Benefits Act. Le salaire total d'emploi occasionnel ou à temps partiel était auparavant considéré comme un revenu, à l'exception des dépenses liées à l'emploi.

Pendant l'année, environ 200 établissements pour enfants, disposant de quelque 2,365 lits, figuraient sur la liste des foyers de soins spéciaux, en vertu de l'accord fédéral sur les frais partagés. Ces établissements comprennent les foyers collectifs et les foyers d'accueil administrés par les sociétés d'aide à l'enfance et les établissements traitant les enfants qui souffrent de troubles affectifs.

Services de bien-être social

Le gouvernement fédéral contribue au paiement des nouveaux débours faits pour les services de bien-être social fournis par trois genres d'organismes de la province. Il s'agit de l'administration de l'assistance et de la prestation de services de bien-être social par le ministère provincial des Services sociaux et familiaux; du coût d'administration, par environ 70 services municipaux de bien-être social, de l'assistance sociale générale et d'autres régimes; et de ce qu'il en coûte pour assurer les services de bien-être à l'enfance, y compris les services de surveillance des enfants placés, les services d'adoption, les services de protection et les services fournis aux mères célibataires, par les organismes d'aide à l'enfance de la province.

Réalisations importantes en 1970-1971

Les taux de l'assistance ont été augmentés en vertu de la Family Benefits Act. Le taux mensuel maximal pour une famille de quatre a été porté à $330, soit une augmentation de $30, et des montants supplémentaires pour les bénéficiaires qui ont plus de quatre enfants ont été portés à $15, soit une augmentation de $5 par mois.

Les budgets préétablis (alimentation, habillement, services d'utilité publique, fournitures ménagères et besoins personnels) ont été portés de $62 à $68 pour les personnes seules et de $96 à $109 pour les personnes mariées. Les budgets préétablis pour des familles avec enfants ont aussi été augmentés, par exemple, les montants pour les familles biparentales avec 6 enfants s'échelonnent de $264 à $350. Ils s'échelonnaient auparavant de $236 à $314.

Les allocations maximales d'hébergement pour les personnes seules ont été portées de $43 à $47 par mois. Pour des personnes avec une famille à charge, l'allocation a été portée de $75 à $85 pour les immeubles non chauffés et de $85 à $95 pour les immeubles qui sont chauffés. Un montant supplémentaire de $5 peut être accordé pour chaque bénéficiaire en sus de deux. Les allocations pour combustibles ont été réétudiées et le montant annuel maximal varie selon le genre de logement, le nombre de pièces et l'emplacement. Le montant annuel pour des maisons détachées s'échelonne de $87 à $288, dans un district territorial, et de $61 à $203, en d'autres lieux de la province.

Les taux de pension ont été augmentés. L'allocation pour une personne seule a été portée de $85 à $90 par mois et de $130 à $145 pour les personnes mariées.

aux municipalités 70 p. 100 des frais nets engagés dans les soins fournis aux personnes nécessiteuses dans ces foyers.

2. On prend également soin, aux termes de la Charitable Institutions Act, des personnes âgées ou infirmes et d'autres personnes dans plus de 110 établissements administrés par des organismes bénévoles ou religieux. Ces institutions disposent de plus de 8,400 lits pour les soins de garde qu'on dispense à ces personnes. Au cours de l'année à l'étude, la province a remboursé à ces foyers 80 p. 100 de leur frais nets, basés sur la moyenne des frais quotidiens de soins et d'entretien, sans que ce montant puisse dépasser $9 par jour.

3. La province fournit une aide aux personnes nécessiteuses pour payer les soins dispensés dans les foyers de soins de garde privés en vertu de la Family Benefits Act et de la General Welfare Assistance Act, jusqu'à concurrence d'un maximum de $11.00 par jour. Aux termes de cette dernière Loi, les municipalités reçoivent un remboursement provincial s'élevant à 80 p. 100 du montant maximal des frais. Il y a environ 450 foyers de soins de garde, qui disposent de plus de 14,000 lits, principalement pour les soins aux personnes âgées.

Les personnes qui résident dans les foyers précités reçoivent $25.00 par mois pour leurs menues dépenses.

4. De plus, en vertu de la Homes for Special Care Act, il y a environ 225 foyers de soins de gardes et 242 foyers de soins infirmiers, disposant d'environ 5,900 lits et autorisés à recevoir les anciens patients d'hôpitaux psychiatriques. En vertu de la Family Benefits Act, la province paie l'entretien des personnes nécessiteuses retenues dans ces foyers. Le coût maximal s'élève à $11.00 par jour, pour les soins infirmiers et à $36.75 par semaine, pour les soins de garde. Les frais supplémentaires touchant l'habillement, les effets personnels et les funérailles sont aussi partageables.

Soins à l'enfance

Le gouvernement fédéral contribue au paiement des frais d'entretien des enfants placés dans des foyers nourriciers et dans des établissements de soins pour enfants aux termes de la Child Welfare Act. La plus grande partie des coûts est destinée aux enfants placés par plus de cinquante sociétés d'aide à l'enfance de la province. La province contribue à raison de 60 p. 100 et les municipalités à raison de 40 p. 100 aux frais de garde des enfants. La province supporte entièrement les frais d'entretien et de garde d'enfants issus de parents non mariés.

Les prestations sont fondées sur un budget préétabli pour l'entretien de la maison, l'alimentation, l'habillement et les besoins divers. Des suppléments sont accordés pour le chauffage et le logement et l'assurance médicale, et l'assurance médicale et l'assurance-hospitalisation sont fournies gratuitement. En déterminant le montant des prestations, il est tenu compte de la composition et de la taille de la famille. Le Régime est administré par le ministère des Services sociaux et familiaux et par ses 22 bureaux régionaux.

Les personnes qui ne sont pas admissibles à la Family Benefits Act peuvent être assistées en vertu de la General Welfare Assistance Act. Les municipalités accordent également leur assistance en fonction des besoins, en faisant usage de budgets préétablis et en tenant compte du logement et du chauffage, services pour lesquels l'allocation maximale est fixée par la province. Ce régime prévoit également une assistance supplémentaire aux bénéficiaires de la pension de sécurité de la vieillesse, des allocations en vertu de régimes spéciaux ainsi que des prestations familiales et des allocations à l'intention des pères à charge, des veuves et des femmes célibataires ainsi que des allocations de réadaptation.

Une aide financière peut être fournie aux personnes dans le besoin, ou en leur nom, pour certaines dépenses comme les médicaments, les prothèses, les frais de funérailles et de sépulture. La province rembourse aux municipalités 80 p. 100 du coût de l'assistance et l'aide supplémentaire, ainsi que la moitié du coût de l'aide spéciale.

La province rembourse aux municipalités les frais relatifs à l'administration des services de bien-être, des salaires, des déplacements, etc, à raison de 50 p. 100 de l'excédent de l'année 1964, prise comme année de base.

Les Services de soins médicaux

Les assistés sociaux sont protégés en cas de besoin de soins médicaux et hospitaliers, en vertu des régimes Universal Hospital Insurance et Medical Care. Une municipalité ou la province peut fournir les soins dentaires, grâce à la Family Benefits Act et à la General Welfare Assistance Act. Des soins médicaux supplémentaires sont dispensés par les municipalités en vertu de la General Welfare Assistance Act.

Soins en établissement

Des soins en établissement sont dispensés aux adultes, en vertu d'un certain nombre de Régimes provinciaux:

1. On soigne les vieillards dans plus de 75 foyers administrés par les municipalités, les comtés et les districts, aux termes de la Home for the Aged and Rest Homes Act. Ces institutions disposent de plus de 14,000 lits pour les personnes âgées. La province rembourse

Services de bien-être social

Les contributions fédérales s'appliquent aux nouveaux débours faits pour les services de bien-être social, fournis principalement en vertu de la Loi de l'assistance-publique, de la Loi de la Commission des allocation sociales et de la Loi de l'adoption, par le ministère des Affaires sociales, par la ville de Montréal et par des organismes bénévoles de bien-être social.

Réalisations importantes en 1970-1971

Le nouveau Régime d'aide sociale du Québec a pris effet lors de la promulgation de la Loi de l'aide sociale, qui est entrée en vigueur le 1er novembre 1970. Les principaux articles de ce régime ont déjà été décrits.

Une loi visant à modifier la Loi de l'assistance publique, la Loi des allocations scolaires et la Loi des allocations familiales du Québec a reconstitué la Commission d'appel de l'assistance publique sous le nom de Commission d'appel de l'aide et des allocations sociales. Cette Commission est autorisée à entendre des appels en vertu de la Loi des allocations familiales du Québec et de la Loi des allocations scolaires ainsi que la Loi de l'aide sociale.

La Loi sur le ministère des Affaires sociales, entrée en vigueur le 22 décembre 1970, a créé le ministère des Affaires sociales pour que celui-ci puisse assumer les fonctions dont s'acquittaient au préalable le ministère de la Santé et le ministère de la Famille et du Bien-être social, respectivement.

La Loi sur le Conseil de la famille et des Affairs sociales, égalemen entrée en vigueur le 22 décembre 1970, a institué un nouveau corps consultatif, en l'occurrence, le Conseil de la famille et des Affaires sociales, destiné à remplacer le Conseil supérieur de la famille. Le Conseil, avec l'assentiment du ministère des Affaires sociales, peut entreprendre des études dans les domaines de la santé, des services sociaux, de l'assistance sociale et des assurances sociales.

ONTARIO

Assistance générale

La Family Benefits Act et la General Welfare Assistance Act offrent respectivement, à longue ou à courte échéance, de l'assistance aux personnes nécessiteuses.

Les nécessiteux, particuliers et familles, qui ont besoin d'une assistance prolongée peuvent obtenir une allocation en vertu de la Family Benefits Act. Cette Loi vient en aide aux personnes qui, âgées de 65 ans ou plus, ne reçoivent pas d'allocations de sécurité de la vieillesse, aux femmes âgées de 60 ans et plus, aux invalides ou aveugles de 18 ans ou plus, aux mères ayant charge d'enfants quand le père est absent ou chômeur aux pères ayant charge d'enfants et aux mères élevant d'autres enfants que les leurs.

prendre effet à compter de la date indiquée par la Commission. La décision de la Commission est irrévocable.

Services de soins médicaux

Les soins médicaux sont dispensés aux assistés sociaux en vertu de la Loi de l'aide sociale. Les prestations comprennent les services de médecins, les services de diagnostic, la chirurgie dentaire et certains services d'optométrie qui sont fournis par l'intermédiaire du régime universel d'assurance-maladie qu'administre la Régie de l'assurance-maladie du Québec. Des prestations supplémentaires, comme le coût d'achat et de réparation d'une paire de lunettes, le coût de soins dentaires, le coût d'achat ou de location de prothèses, d'appareils orthopédiques ou de tout équipement médical, ainsi que des médicaments et d'autres services exigés, sont fournies en tant qu'articles d'assistance, en vertu de la Loi de l'aide sociale.

Soins en établissement

Les personnes nécessiteuses qui exigent des soins en établissement sont entretenues dans des foyers de vieillards, dans des foyers de soins de garde et dans d'autres établissements qui sont administrés par des communautés religieuses ou par des organismes de bienfaisance, ou qui appartiennent à des particuliers. Le ministère des Affaires sociales délivre des permis à ces établissements et en assure la surveillance. Les taux d'entretien des personnes nécessiteuses sont fixés selon l'intensité des soins dispensés par le foyer et selon les besoins de l'assisté.

A la fin de l'année, environ 455 établissements qui dispensent aux adultes les soins de garde ou les soins infirmiers figuraient sur la liste des foyers de soins spéciaux, dressée en vertu de l'accord fédéral sur le partage des coûts. Les personnes résidant dans des foyers recevaient $22 par mois pour leurs menues dépenses. Ce montant est aussi payable aux personnes nécessiteuses dans les hôpitaux et les sanatoriums.

Soins de garde à l'enfance

Le gouvernement fédéral partage ce qu'il en coûte pour soigner et entretenir les enfants confiés aux établissements de bien-être à l'enfance, ainsi qu'aux organismes sociaux, en vertu de la Loi de l'assistance publique. Le coût total du bien-être social à l'enfance ressortit à la province, depuis le 1er avril 1966. Ces soins peuvent être dispensés dans une gamme d'établissements pour enfants, de foyers nourriciers ou de garderies privées. L'éventail complet des services va des services de surveillance et de soins généraux fournis aux enfants normaux jusqu'à la formation des enfants arriérés, en passant par le traitement intensif et la protection des enfants souffrant de problèmes psychologiques.

Pendant l'année, 138 établissements de soins pour enfants figuraient parmi les foyers de soins spéciaux. Quatre-vingt-six d'entre eux fonctionnent à titre d'organismes bénévoles.

Pour les personnes de moins de 30 ans qui sont aptes au travail, il se peut que le montant total des allocations ne dépasse pas $75 par mois pour l'hébergement et les exigences alimentaires, vestimentaires, ménagères et personnelles.

Les familles peuvent posséder des biens pour une valeur qui ne dépasse pas $2,000 plus $200 pour chaque enfant à charge, mais les disponibilités ne peuvent dépasser $500. Les personnes seules peuvent posséder des biens pour une valeur qui ne dépasse pas $1,000, mais les disponibilités ne peuvent dépasser $200. Certains articles sont exemptés lorsqu'on détermine la valeur des biens. Ceux-ci comprennent: des articles d'utilisation courante pour une valeur qui ne dépasse pas $1,000; un capital investi dans une annuité; des outils nécessaires à l'emploi pour une valeur qui ne dépasse pas $1,000; une voiture d'une valeur de $1,000; et la valeur de rachat d'une police d'assurance d'un montant de $1,000. La maison qui sert de résidence est aussi exemptée à condition que la valeur nette de la propriété basée sur sa valeur courante, ne dépasse pas $8,000, après la déduction du montant de l'hypothèque et d'autres frais. Lorsque la valeur nette dépasse $8,000 mais ne dépasse pas $15,000, de l'aide peut être offerte sous forme de prêt ou de garantie de remboursement d'un prêt.

En calculant le revenu, il faut noter que le revenu net provenant de l'emploi, de chambreurs et des pensionnaires, ainsi que des loyers et d'autres sources, considérés comme étant assujettis à certaines conditions Les articles suivants sont exclus lorsqu'on détermine le revenu: les allocations familiales et les allocations aux jeunes du gouvernement fédéral les allocations familiales et scolaires provinciales; des cadeaux occasionnels, jusqu'à concurrence de $100 par an; des prestations d'organismes de bienfaisance; des contributions bénévoles de particuliers, jusqu'à concurrence de $25 par mois; des versements en vertu de la Loi de l'assistance publique pour la garde d'un enfant en foyer nourricier; les gains occasionnels d'enfants à charge et le revenu de l'emploi pendant le mois où l'assistance sociale prend fin.

Le Régime d'aide sociale est administré par l'entremise des bureaux régionaux et locaux du ministère des Affaires sociales, excepté la ville de Montréal qui administre le Régime au nom de la province.

Une personne qui a fait une demande d'aide sociale doit être pourvue d'un avis écrit concernant la décision qu'on a prise relativement à sa demande, y compris les motifs. Muni de cet avis, le directeur du bureau local est tenu d'adresser la feuille de renseignements qui décrit le droit de vérification et la procédure à suivre. Lorsqu'on exige une vérification, le directeur régional est tenu d'effectuer une étude détaillée des motifs de la plainte et d'examiner la décision du bureau local. Il lui faut ensuite émettre un avis écrit de sa décision, en y joignant une feuille qui montre que le client peut interjeter appel aux frais de la Commission d'appel de l'assistance publique et des allocations. Un avis doit aussi être adressé au directeur du bureau local qui doit appliquer la décision à compter de la date d'émission de l'avis. Les décisions de la Commission d'appel de l'aide et des allocations sociales doivent aussi comprendre les motifs et

QUÉBEC(1)

Assistance générale

L'aide sociale est fournie en vertu de la Loi et du Règlement de l'aide sociale, qui sont entrés en vigueur le 1er novembre 1970. La Loi prévoit de l'assistance pour trois catégories de personnes: les familles ou les personnes qui manquent de moyens de soutien, dont les besoins courants et particuliers sont pris en considération; les familles ou les personnes ayant à faire face à une situation qui présente un danger pour la santé, une menace d'indigence ou de perte des moyens de subsistance, qui ont droit à l'aide préventive, en vue de pourvoir aux besoins particuliers; et les chefs de famille ou les personnes qui travaillent, mais dont le revenu ne suffit pas pour répondre aux besoins courants ou particuliers. Les frais de l'assistance fournie aux mères nécessiteuses qui ne remplissent pas les conditions requises en vue d'obtenir de l'aide, sont partagés en vertu de la Loi fédérale sur l'assistance-chômage; l'administration ressortit à la Loi québécoise de l'assistance aux mères nécessiteuses.

Le montant de l'assistance est établi en fonction du déficit entre les besoins et le revenu disponible, sauf dans le cas où la famille ou la personne n'est pas admissible à cause de la valeur des biens qu'elle possède. L'assistance peut être accordée en nature ou sous forme d'argent, de services, de prêt, ou de garantie de remboursement d'un prêt.

Les allocations destinées à pourvoir aux exigences alimentaires, vestimentaires, ménagères et personnelles s'échelonnent de $46 par mois pour une personne seule à $143 et $190 pour un couple avec quatre enfants, selon les âges de ces derniers. Une assistance supplémentaire est accordée lorsqu'il y a plus de quatre enfants ou plus de deux adultes. Les allocations pour le logement varient selon la localité et la taille de la famille. Les prestations, qui comprennent des frais de chauffage, d'électricité, de gaz et d'eau, s'échelonnent de $45 pour une personne seule à $95 pour les familles de quatre et plus. Une assistance supplémentaire destinée à pourvoir au frais de logement, à concurrence de 50 p. 100 des allocations établies pour l'hébergement, peut être accordée à titre de besoin particulier, s'il y a lieu, en vue de protéger la santé de la personne ou l'unité de la famille, ou lorsqu'un plan de rétablissement se révèle nécessaire. Cette disposition s'applique aussi aux pensionnaires.

Les taux de pension s'élèvent à $60 par mois pour une personne seule, $90 pour deux personnes et à $110 pour trois personnes. Le montant des allocations personnelles et vestimentaires des pensionnaires s'élève respectivement à $15, à $28 et à $39 par mois.

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1) C'est aux termes de la Loi sur les programmes établis (arrangements provisoires) que le gouvernement fédéral accorde son appui financier aux régimes visés par l'accord conclu avec le Québec relativement au Régime d'assistance publique du Canada.

Réalisations importantes en 1970-1971

A compter du 1er avril 1970, les prix de gros des médicaments vendus par les pharmaciens aux assistés sociaux ont été modifiés. Précédemment, le prix de gros s'élevait aux deux tiers du prix catalogué plus un honoraire de $1.70 pour chaque ordonnance. Le prix de gros des médicaments vendus par un pharmacien est le moindre des montants suivants, ces montants étant tous arrondis au montant le plus proche se terminant par cinq: les deux-tiers du prix de détail ou du prix de catalogue suggéré par le fabricant, plus un honoraire professionnel de $1.95 pour chaque ordonnance; onze-dixièmes du prix de vente du fabricant lorsqu'il n'y a pas de prix de catalogue ou de prix suggéré au détail, plus un honoraire professionnel de $1.95 ou le prix ordinaire demandé pour les médicaments vendus ou les services rendus par le pharmacien.

Les modifications apportées à la Child Welfare Act sont entrées en vigueur le 20 juillet 1970. En vertu de la nouvelle loi, le père ou la mère qui, en raison de circonstances telles que la maladie, est provisoirement incapable de bien subvenir aux besoins de son enfant peut demander au directeur du bien-être à l'enfance de prendre les mesures nécessaires pour donner à l'enfant les soins dont il a besoin. Ces mesures peuvent s'étendre sur une période d'un an et sont renouvelables. Le directeur peut résilier le contrat en tout temps, lorsqu'il estime que cette mesure est jugée dans le meilleur intérêt de l'enfant et alors l'enfant peut être appréhendé comme enfant ayant besoin de protection.

Lorsque les intérêts d'un pupille l'exigent, le directeur peut signifier un avis écrit à toute personne pour l'empêcher de communiquer avec l'enfant ou avec ses parents nourriciers, sans l'autorisation écrite du directeur. Toute personne ayant reçu un tel avis est coupable d'une infraction si elle essaie d'entrer en communication avec l'enfant ou avec les parents, sans une autorisation écrite du directeur.

Un nouvel article de la loi stipule qu'aucune action ne peut-être entreprise contre une personne qui informe le directeur du Bien-être à l'enfance de l'abandon, la désertion, des mauvais traitements ou du besoin de protection d'un enfant, à moins que l'information n'ait été donnée dans l'intention de nuire ou sans motif raisonnable ou probable.

La loi prévoit l'audition des plaintes des personnes qui se croient lésées par les décisions administratives qui sont rendues en vertu de la Child Welfare Act.

Un appel peut être interjeté devant la Division du banc de la Reine de la Cour Suprême des décisions rendues, aux termes de la Child Welfare Act, par les juges des tribunaux provinciaux ou des tribunaux de comté. Il peut ensuite être interjeté appel de l'ordonnance ou de la décision rendue par cette dernière Division devant la Division d'appel de la Cour Suprême.

Soins médicaux

Les services des médecins, chirurgiens, obstétriciens et autres spécialistes sont dispensés aux assistés sociaux en vertu de la Social Welfare Act. On délivre une carte médicale aux bénéficiaires. Les services sont dispensés aux termes d'un accord conclu entre la province et l'Association médicale du Nouveau-Brunswick. Des mesures supplémentaires sont prévues pour d'autres besoins de santé comme les services de radiologie, du laboratoire et autres services diagnostiques qui ne sont pas dispensés aux termes du Hospital Services Act, ainsi que les médicaments sur ordonnance, les soins dentaires et ophtalmologiques.

Soins en établissement

En vertu de la Social Welfare Act, on aide les personnes nécessiteuses qui ont besoin de soins en établissement à faire face aux coûts des soins dispensés dans les foyers de vieillards, dans les foyers de soins en garde et dans d'autres genres d'établissements de bien-être. Ces foyers détiennent un permis délivré en vertu de la Health Act. Les taux sont établis pour chaque foyer conformément au genre de soins dispensés; ils doivent être approuvés par le directeur provincial du bien-être social. Les résidents de ces foyers obtiennent, pour leurs menues dépenses, $15 par mois.

Au cours de l'année, 91 établissements dispensant des soins de garde ou des soins infirmiers aux adultes et comprenant en tout 2,817 lits figuraient sur la liste des foyers de soins spéciaux dressée en vertu de l'accord fédéral sur le partage des coûts.

Soins à l'enfance

Le gouvernement fédéral partage les frais d'entretien des enfants placés, en vertu de la Child Welfare Act, dans des foyers nourriciers et dans des établissements de soins de garde pour enfants. La province se charge de l'entretien de tous les enfants ainsi placés. Le taux quotidien de la pension est établi en fonction de l'âge de l'enfant; des montants supplémentaires assurent l'habillement, les soins médicaux, l'éducation et d'autres besoins.

Les établissements de soins pour enfants reconnus par le Régime comprennent le New Brunswick Protestant Orphans' Home de Saint-Jean, avec 173 lits, ainsi que trois autres établissements comptant ensemble plus de 327 lits.

Services de bien-être social

Le gouvernement fédéral contribue en vertu du Régime d'assistance publique du Canada au paiement des nouveaux débours faits pour l'administration de l'assistance suivant les dispositions de la Social Welfare Act, pour la prestation de services connexes de bien-être social et pour le développement des services de protection et d'aide à l'enfance. Tous ces services sont dispensés par la province elle-même par l'entremise de ses bureaux de district.

Une loi relative au paiement des prestations a été sanctionnée le 24 avril 1970 et est entrée en vigueur le 1er septembre 1970. Les dispositions de cette loi s'appliquent chaque fois qu'il faut déterminer un paiement à moins qu'une autre loi ne contienne des dispositions spécifiques relatives au paiement des prestations. La Settlement Act comprend les dispositions relatives au paiement des prestations qui figuraient précédemment dans la Social Assistance Act.

Un certain nombre de modifications ont été apportées à la loi concernant les enfants et parents. En vertu de la Child Welfare Act, la définition de l'enfant qui a besoin de protection comprend à la fois les enfants délaissés, sur le plan affectif, et victimes de mauvais traitements, sur le plan physique. La loi contient maintenant des dispositions relatives aux congés des élèves fréquentant les Training Schools.

L'Unmarried Parents Act a fait passer de 16 à 18 ans l'âge maximal de prise en charge de l'enfant et les paiements globaux qui doivent être versés par les pères putatifs ont été augmentés.

Le père ou la mère d'un enfant peut à présent se prévaloir des dispositions de la Infants Custody Act. Précédemment, seule la mère pouvait présenter une demande afin de pouvoir assurer la garde de l'enfant. Ces cas sont maintenant tranchés par le tribunal familial.

Avec l'adoption de la Age of Majority Act, tous les droits et responsabilités des adultes s'appliquent maintenant aux personnes de 19 ans et plus.

La Day Care Services Act prend des dispositions en vue de l'établissement et du fonctionnement d'établissements de soins de jour par la province et par les municipalités. La province peut subventionner les organisations non lucratives gérant les centres de soins de jour. La Family and Child Welfare Division est responsable de l'application de la Loi.

NOUVEAU BRUNSWICK

Assistance générale

L'assistance publique générale envers ceux qui sont dans le besoin est fournie aux termes de la Social Welfare Act qui est entrée en vigueur le 1er janvier 1967. Les prestations sont établies d'après des allocations budgétaires qui comprennent des montants fixes pour la nourriture, l'habillement, les fournitures ménagères et personnelles et des montants maximaux pour le logement, le chauffage et les services d'utilité publique. On prévoit également la fourniture de certains articles pour des besoins spéciaux. C'est la province qui administre ce régime sur son territoire, qui est découpé en cinq régions, aux fins de la santé et du bien-être social.

Les établissements provinciaux de soins à l'enfance pour lesquels les coûts sont partagés comprennent la Nova Scotia Training School pour enfants arriérés. Ces foyers ont une capacité de plus de 500 lits. De plus, la province possède et dirige la Nova Scotia Boys' School et la Nova Scotia Girls' School où l'on s'occupe d'environ 185 jeunes; la St. Euphrasia's Training School dirigée par des religieux, peut recevoir 60 adolescents. Quelque treize établissements pour enfants, dirigés par des organismes bénévoles ou religieux, figurent aussi sur les listes établies en vertu du Régime.

Services de bien-être social

Les contributions du gouvernement fédéral relativement aux nouveaux débours effectués pour les services de bien-être social s'appliquent, en Nouvelle-Ecosse, à trois genres d'organismes: le ministère provincial du Bien-être public, y compris l'administration centrale de ce ministère et les bureaux régionaux et de district; les services municipaux de bien-être social qui sont chargés de l'administration de l'assistance et de la prestation de services connexes de bien-être social; et les sociétés d'aide à l'enfance ainsi que les organismes de services à la famille et à l'enfance. La province paye les frais de surveillance des enfants en tutelle et partage, avec les municipalités, le coût des services de protection, des services pour mères célibataires et des services d'adoption.

Réalisations importantes en 1970-1971

La loi intitulée Social Assistance Act 1970 a été modifée afin d'ajouter la Partie III qui a trait aux appels. Avant cette modification, les dispositions relatives aux appels étaient contenues dans les règlements. Les bénéficiaires de l'assistance provinciale ou municipale peuvent faire appel de décisions rendues par le directeur de l'assistance sociale provinciale, par les directeurs des Services de bien-être social municipaux ou par les Comités de bien-être social, pour toutes les réclamations relatives à l'administration de l'assistance. Les règlements ont été modifiés afin de renforcer les procédures d'appel et de les rendre plus efficaces.

La Partie IV de la Social Assistance Act abroge l'Old Age Assistance Act et met fin à la réception des réclamations introduites aux termes de la Disabled Persons Allowances Act.

Un arrêté en Conseil entré en vigueur le 10 août 1970, a introduit des modifications dans le décompte du salaire d'un bénéficiaire de ses besoins financiers, décompte qui peut aller de 50 p. 100 du salaire brut à 50 p. 100 du salaire net des bénéficiaires, où à 25 p. 100 du salaire net lorsque le bénéficiaire ou demandeur est invalide et que son salaire provient de son activité dans le cadre d'un programme de réadaptation approuvé par le Ministre ou dans le cadre d'un programme thérapeutique d'adaptation au travail.

budgétaires et accorde également des subventions aux municipalités afin qu'elles fournissent une aide financière établie en fonction des besoins. Les contributions provinciales s'élèvent à 75 p. 100 ou plus des dépenses, selon les ressources financières de la municipalité. L'assistance est administrée par les services municipaux de bien-être social et, dans plusieurs régions, par le ministère provincial du Bien-être public ou par une société locale d'aide à l'enfance, au nom de la municipalité.

Soins médicaux

Les personnes nécessiteuses sont protégées par l'assurance-hospitalisation et par l'assurance médicale. Une assistance supplémentaire peut être fournie, pour couvrir les dépenses spéciales concernant certains examens médicaux, frais de transport et services de réadaptation.

Soins en établissement

Les municipalités apportent, en vertu de la Partie II de la Loi sur l'assistance sociale, une assistance aux personnes nécessiteuses ayant besoin de soins en établissement. Ces soins sont dispensés dans seize foyers municipaux pour vieillards, dans quatre foyers municipaux pour les invalides (qui s'occupent principalement d'adultes souffrant d'arriération mentale) et dans nombre de foyers privés pour vieillards et dans des foyers de soins de garde détenant un permis délivré par le ministère du Bien-être public aux termes de la Boarding Homes Act ou par le ministère de la Santé aux termes de la Nursing Homes Act.

Au cours de l'année, 120 foyers fournissant des soins infirmiers ou les soins à domicile figuraient sur la liste de foyers de soins spéciaux dressée en vertu de l'accord fédéral sur le partage des coûts. Les montants versés pour les soins dispensés dans chaque établissement sont fixés selon le genre et l'intensité de ces soins et doivent être approuvés par le ministère du Bien-être public. Les pensionnaires des foyers peuvent obtenir une allocation mensuelle de $15 pour menues dépenses. Les municipalités peuvent aussi verser une allocation de menues dépenses aux malades nécessiteux dans les hôpitaux psychiatriques et dans les hôpitaux de tuberculeux.

Soins à l'enfance

Le gouvernement fédéral partage les frais d'entretien des enfants placés, en vertu de la Child Welfare Act, dans des foyers nourriciers et dans des établissements de soins de garde à l'enfance. La surveillance de ces enfants relève de la division du bien-être à la famille et à l'enfance du ministère provincial du Bien-être public, des neuf sociétés d'aide à l'enfance et de trois organismes de services à la famille et à l'enfance. Les paiements faits pour l'entretien se fondent sur des taux mensuels qui ont été fixés par un comité formé aux termes de la Loi intitulée Child Welfare Act.

Services de bien-être social

Les contributions fédérales portent sur les nouvelles dépenses engagées pour les services de bien-être social dispensés par le ministère du Bien-être social et trois bureaux de bien-être social, y compris les frais d'administration du régime d'assistance publique générale et des services d'adoption, de protection et de soins de garde à l'enfance.

Réalisations importantes en 1970-1971

A partir du 10 juin 1970, les allocations mensuelles versées pour la nourriture sont passées de $15 à $20, pour chaque enfant de moins de 12 ans. L'allocation versée au premier et au second adultes de chaque famille reste fixée à $30 par mois, mais elle est passée de $20 à $25 pour chaque personne supplémentaire.

A partir du 1er juin 1970, l'allocation quotidienne versée aux personnes se trouvant dans des établissements provinciaux est passée de $12 à $14.

Les modifications qui ont été apportées à la Children's Protection Act sont entrées en vigueur le 25 juin 1970. Par conséquent, lorsqu'une ordonnance est rendue aux termes de l'article 20 de la Loi sur les jeunes délinquants (du Canada) confiant un enfant au surintendant responsable des enfants abandonnés et des délinquants ou à un école technique, le secrétaire provincial est censé, à la même date, rendre une ordonnance exigeant que l'enfant soit traité conformément aux dispositions de la Children's Protection Act.

NOUVELLE-ÉCOSSE

Assistance générale

L'assistance publique générale est fournie aux termes des Parties I et II de la Social Assistance Act, 1970.

L'assistance provinciale est versée en vertu de la Partie I aux mères nécessiteuses avec enfants à charge, aux invalides, aux mères nourricière et aux pères inaptes au travail, ayant des enfants à charge et des adolescents de 18 ans et plus poursuivant leurs études. L'assistance se fonde sur une évaluation des besoins; l'allocation maximale versée aux invalides est de $100 par mois. Les allocations aux familles nécessiteuses sont calculées, jusqu'à concurrence de $175 par mois, sur une base de cent pour cent des exigences budgétaires établies. Les femmes nécessiteuses de 60 à 65 ans peuvent recevoir jusqu'à $75 par mois. Le montant maximal payable aux personnes de 65 ans et plus qui n'ont pas droit à la pension de la sécurité de la vieillesse est de $100 par mois.

Les municipalités apportent leur assistance en vertu de la Partie II de la loi aux personnes qui ne sont pas protégées par le régime provincial d'assistance sociale, ou pour compléter l'assistance accordée par la province. Aux termes de cette Partie, la province fixe des normes

ÎLE-DU-PRINCE-ÉDOUARD

Assistance générale

L'assistance sociale générale est dispensée en vertu du General Welfare Assistance Act. Le montant des allocations varie suivant des barèmes établis pour certains besoins comme la nourriture, l'habillement, le logement, les articles ménagers et personnels, le chauffage et les services d'utilité publique. On prévoit également une assistance pour certains besoins spéciaux tels que les services ménagers et le matériel ou les services que nécessite la réadaptation. Ce régime est administré par le ministère provincial du Bien-être social et par trois bureaux de bien-être social de la ville de Charlottetown.

Soins médicaux

Le General Welfare Assistance Act prévoit l'octroi d'une assistance pour financer les soins médicaux. Ces derniers peuvent comprendre les services médicaux et chirurgicaux nécessaires, les soins infirmiers, dentaires et optiques, de même que les médicaments et les prothèses indispensables obtenus sur ordonnance.

Soins en établissement

En vertu de ce régime général d'assistance, on aide les personnes nécessiteuses qui se trouvent dans des maisons de soins de garde, dans les foyers de vieillards, dans des centres d'accueil et dans d'autres établissements de bien-être social, à payer les frais des soins qu'elles reçoivent. Les personnes qui font l'objet de ces soins sont admissibles à une allocation de menues dépenses pouvant atteindre $10 par mois.

Au cours de l'année, dix établissements pour adultes, disposant en tout de 1,018 lits de soins de garde et de soins infirmiers, étaient considérés comme foyers de soins spéciaux en vertu de l'Accord fédéral de partage des coûts. Ces lits se trouvaient au nombre de 863 dans des établissements dirigés par le gouvernement provincial. Ces maisons comprennent un foyer de transition pour le traitement des alcooliques.

Soins à l'enfance

La province fait des versements en vue de l'entretien des enfants qui sont confiés à des foyers nourriciers en vertu de la Children's Protection Act. Les paiements ont également trait aux enfants abandonnés qui sont confiés de façon permanente ou temporaire, par les tribunaux, à la garde et aux soins des autorités chargées du bien-être à l'enfance. Deux établissements offrant des soins de garde aux enfants, et comptant en tout 85 lits, figurent sur la liste des foyers de soins spéciaux.

Le directeur du Bien-être de l'enfance, du ministère du Bien-être social, administre le programme de soins de garde à l'enfance.

service du gouvernement provincial ou de l'un de ses organismes affiliés. L'un des membres de la Commission doit être un assisté social à long terme et les deux autres doivent posséder de l'expérience dans le domain du bien-être social, de l'éducation ou des assurances. La Commission possède les pouvoirs d'un commissaire aux termes de la Public Enquiries Act et les personnes qui témoignent devant elle sont liées par les disposi tions de la loi.

La loi intitulée "Northern Labrador (Social Services and Rehabilita Act 1970" est entrée en vigueur. Cette loi institue la Division des servic du Labrador du Nord au sein du ministère des Services sociaux et de la réadaptation. Cette Division est chargée de dispenser son aide et ses services aux Indiens, aux Esquimaux et aux autres personnes résidant dans la partie septentrionale du Labrador. Le gouvernement fédéral ne participe pas à ces coûts aux termes du Régime d'assistance publique du Canada.

A partir du 1er janvier 1971, les allocations de combustible pour le assistés sociaux à long terme sont passées de $15 à $20 par mois, pour les mois de janvier à avril inclusivement.

Le 30 mars 1971, d'autres modifications ont été apportées au Règlement sur l'assistance sociale et elles entreront en vigueur, le 1er avril 1971. Ces modifications comprennent l'octroi d'une allocation pour les besoins spéciaux pouvant aller jusqu'à $40 par mois pour les bénéficiaires de la pension de Sécurité de la vieillesse et du Supplément du revenu garanti, dont les épouses sont âgées de moins de 65 ans. A compter du 1er avril 1971 également, les allocations alimentaires mensuelles destinées aux assistés sociaux à court terme ont été portées à $35 par personne, célibataires ou chefs de famille, à $30 pour chaque autre adulte et à $20 par enfant. Ces taux sont les mêmes que ceux qui s'appliquent aux assistés sociaux à long terme.

Les bénéficiaires de l'assistance à court terme seront autorisés à recevoir un revenu permissible pouvant aller jusqu'à $25 par mois pour les célibataires et les familles comportant au plus cinq personnes. Pour les familles de plus de cinq personnes, cette somme peut-être augmentée de $5 par mois par personne supplémentaire, et atteindre un maximum d $50 par mois. L'assistance sociale à court terme est ordinairement payée par chèque et non plus par bon, comme précédemment.

A partir de 1er novembre 1970, les allocations versées aux personnes nécessiteuses qui ont besoin de soins spéciaux dispensés dans des établissements approuvés sont passées de $150 à $300, pour les personnes qui peuvent se déplacer, et de $240 à $360, pour les grabataires.

ou d'ordres religieux, de même que dans les foyers de pension privés détenant un permis du ministère des Services sociaux et de la réadaptation. En plus, un établissement de 200 lits (Hoyle's Home) est administré par ce même ministère.

Environ cent cinquante foyers pour adultes renfermant des lits de soins de garde et de soins infirmiers figuraient sur la liste de foyers de soins spéciaux. Une allocation mensuelle de $15. pour menues dépenses est versée aux personnes nécessiteuses devant faire un séjour dans certains foyers de soins à long terme, dans les hôpitaux et les sanatoriums.

Soins à l'enfance

Le gouvernement fédéral partage le coût de l'entretien des enfants confiés à la garde de foyers nourriciers et de foyers collectifs en vertu de la Child Welfare Act. C'est la Division du bien-être à l'enfance du ministère des Services sociaux et de la réadaptation qui administre ce régime par l'entremise de ses bureaux régionaux. Les taux relatifs aux foyers nourriciers varient avec l'âge de l'enfant.

Parmi les institutions de bien-être à l'enfance dont les frais sont partageables, il y a le foyer pour enfants (Children's Home) situé à Saint-Jean qui offre des soins aux enfants infirmes. De plus, la liste comprend le Boy's Home and Training School (Pleasantville et Whitbourne) et le Girl's Home and Training School qui s'occupent de plus de 100 adolescentes. Soixante-cinq nouvelles institutions dispensant des soins à l'enfance ont été enregistrées au cours de l'exercice 1970-1971.

Services de bien-être social

Le Régime d'assistance publique du Canada prévoit le partage des nouveaux débours faits à l'égard des services de bien-être social dispensés par le ministère provincial des Services sociaux et de la réadaptation. Ces coûts incluent l'administration du régime d'assistance sociale et la prestation de services connexes de bien-être social, de même que les services d'adoption, de protection et de soins aux enfants.

Réalisations importantes au cours de 1970-1971

Une modification apportée à la Loi sur l'assistance sociale, qui est entrée en vigueur le 7 juillet 1970, prévoyait la création d'un Comité de révision administrative et d'un tribunal d'appel indépendant, à savoir la Commission d'appel de l'aide sociale. Toute personne désirant présenter une réclamation relative à l'administration de l'assistance sociale peut déposer une requête écrite devant le Comité de révision administrative dans les soixante jours qui suivent la décision qui fait l'objet de la réclamation. Cette personne peut faire appel de la décision du Comité à la Commission d'appel d'assistance sociale, dans un délai de 30 jours après la date à laquelle elle est avisée de la décision du Comité de révision administrative. La Commission d'appel se compose de trois membres nommés par le ministre des Services sociaux et de la réadaptation. Nul ne peut être nommé membre du tribunal s'il est au

APPENDICE

RÉGIMES PROVINCIAUX SUBVENTIONNÉS AU TITRE DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, AU COURS DE 1970-1971

Comme le précise le présent rapport, le gouvernement fédéral partage le coût de l'assistance sociale, des soins médicaux et des services de bien-être social fournis par les provinces aux personnes qui en ont besoin.

Le présent appendice trace les grandes lignes des régimes provinciaux par l'entremise desquels cette assistance a été accordée au cours de l'année financière 1970-1971 et résume les frais importants survenus au cours de l'année en rapport avec ces régimes. On ne traite que des régimes en vigueur au cours de 1970-1971.

TERRE-NEUVE

Assistance générale

En vertu de la Social Assistance Act, une assistance générale est accordée aux chômeurs et aux personnes qui ont besoin d'une assistance à long terme, y compris les mères nécessiteuses et les personnes handicapées. Le montant des allocations est établi en fonction de barèmes établis par les règlements, relatifs à la nourriture, à l'habillement, aux soins personnels, au chauffage et au loyer ou, dans le cas d'une personne habitant sa propre demeure, relatifs à l'entretien ménager et aux services d'utilité publique. Il peut encore y avoir assistance pour d'autres besoins comme la réparation ou la rénovation de maisons, le transport des malades et la sépulture des indigents. Le ministère des Services sociaux et de la réadaptation administre directement ce régime par l'entremise de bureaux régionaux.

Soins médicaux

Les soins médicaux aux indigents, du moins les soins qui ne sont pas compris dans des programmes d'assurance médicale et d'assurance-hospitalisation, sont fournis par le ministère de la Santé de la province et les frais sont partagés en vertu du Régime d'assistance publique du Canada. Sont compris: les frais de soins infirmiers, et le coût des médicaments. Dans certaines conditions particulières, les soins dentaires, optiques et les services de prothèses peuvent être fournis tout comme le transport vers les centres médicaux et à partir de ces derniers.

Soins en établissement

Grâce au régime d'assistance sociale, on aide les indigents qui ont besoin de soins en établissement à payer les soins fournis dans les foyers de soins de garde, dans les foyers de vieillards relevant de communautés

Pendant l'année, des contributions ont aussi été versées en vertu des quatre autres régimes à frais partagés que la Direction administre; l'assistance-vieillesse, les allocations aux aveugles et aux invalides et l'assistance-chômage. Les dépenses relatives à ces régimes, pour les années financières 1969-1970 et 1970-1971 sont indiquées ci-après. La diminution des paiements est due au fait qu'une plus grande partie des groupes concernés peut bénéficier des dispositions du Régime d'assistance publique du Canada. Étant donné que l'âge d'admissibilité à la pension de la Sécurité de la vieillesse a été abaissé à 65 ans, à compter du 1er janvier 1970, aucune contribution n'a été versée en vertu du Régime d'assistance-vieillesse, au cours de l'exercice 1970-1971.

Régime	Dépenses	
	1969-1970(1) (En millions de dollars)	1970-1971(2) (En millions de dollars)
Assistance-vieillesse	1.5	0.2 (Cr.)(3)
Allocations aux aveugles	3.3	1.6
Allocations aux invalides	11.9	3.6
Assistance-chômage	14.6	9.1
Total	$31.3 (millions)	$14.1 (millions)

1) Y compris les montants versés au Québec, en vertu de la Loi sur les programmes établis (Arrangements provisoires) dans le cadre de ces quatre régimes: assistance-vieillesse: 0.8 million; allocations aux aveugles: 1.4 million; allocations aux invalides: 7.5 millions; assistance-chômage: 13.9 millions.

2) Y compris $8.3 millions versés en vertu du régime de l'assistance-chômage, mais excepté les montants versés au Québec en vertu de la Loi sur les programmes établis (Arrangements provisoires), dans le cadre des trois régimes spéciaux.

3) Crédit: recouvrement de trop-payés versés au titre de la sécurité de la vieillesse.

PAIEMENTS FÉDÉRAUX AUX PROVINCES, EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, PAR PROGRAMME, ANNÉE FINANCIÈRE 1969-1970

Province	Assistance générale	Établissements de soins spéciaux	Soins médicaux	Bien-être à l'enfance	Services de bien-être social	Partie III Adaptation au travail	Total
	$	$	$	$	$	$	$
Terre-Neuve	16,534,688	1,343,359	1,261,150	671,017	478,366	--	20,288,580
Île-du-Prince-Édouard	1,291,675	1,534,099	188,440	191,636	86,673	--	3,292,523
Nouvelle-Écosse	9,299,838	3,504,938	256,825	1,121,381	1,062,855	--	15,245,837
Nouveau-Brunswick	6,678,626	1,814,618	1,493,514	1,009,848	798,686	--	11,795,292
Québec*	90,400,000	11,900,000	11,000,000	33,800,000	9,500,000	--	156,600,000
Ontario	85,885,625	18,446,497	5,759,586	11,427,592	10,319,361	--	131,838,661
Manitoba	14,498,568	141,979	1,153,335	1,775,732	1,690,798	--	19,260,412
Saskatchewan	10,634,603	2,448,673	998,064	1,010,353	2,123,147	18,574	17,233,414
Alberta	23,783,483	1,174,253	771,262	3,158,174	2,447,704	--	31,334,876
Colombie-Britannique	30,975,191	4,168,000	2,027,064	3,087,534	2,828,473	--	43,086,262
Yukon	152,889	--	--	--	--	--	152,889
TOTAL	290,135,186	46,476,416	24,909,240	57,253,267	31,336,063	18,574	450,128,746

* Montants versés au Québec par le ministère des Finances, en vertu de la Loi sur les programmes établis (Arrangements provisoires) (évaluations).

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU REGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNEE FINANCIERE 1970-1971

Province	Assistance générale	Etablissements soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être social	Partie III Adaptation au travail	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	17,664	1,439	708	1,464	691	--	21,966
Île-du-Prince-Édouard	1,591	1,735	197	149	94	--	3,766
Nouvelle-Ecosse	10,169	3,469	1,221	229	1,646	9	16,743
Nouveau-Brunswick	11,028	1,923	954	1,337	--	--	15,242
Québec*	118,223	53,620	12,702	11,529	10,500	--	206,574
Ontario	116,312	29,714	13,842	992	15,303	--	176,163
Manitoba	20,787	1,083	1,977	1,585	2,755	--	28,187
Saskatchewan	14,825	2,861	981	1,111	818	25	20,621
Alberta	30,528	1,735	3,481	404	3,044	--	39,192
Colombie-Britannique	49,811	5,781	4,017	3,275	5,316	7	68,207
Yukon	128	150	254	53	186	--	771
TOTAL	391,066	103,510	40,334	22,128	40,353	41	597,432

* Montants versés au Québec par le ministère des Finances, en vertu de la Loi sur les programmes établis (Arrangements provisoires) (évaluations).

connaissance d'un document de base sur le futur programme de planning familial et ils ont adopté la proposition d'organiser une conférence nationale, en 1972. Le Ministre a également souligné l'intérêt croissant que porte le Ministère à la question du divorce et des procédures de réconciliation. Il a souligné l'utilité d'entreprendre des discussions avec les ministères provinciaux du Bien-être social, les procureurs généraux et les représentants d'organismes de consultation bénévoles.

Débours pour l'assistance publique et les services de bien-être social

Au cours de l'année, le gouvernement fédéral a versé aux provinces $390,858,000 en vertu du Régime. De plus, le Québec a reçu $206,574,000 sous forme de réductions d'impôt et de paiements de péréquation, en vertu de la Loi sur les programmes établis (Arrangements provisoires). Le total des dépenses fédérales pour le Régime s'est élevé à $597,432,000. Les versements, par province et par programme, pour les exercices financiers 1969-1970 et 1970-1971, figurent aux tableaux des pages 20 et 21. Le tableau ci-après indique le nombre de personnes assistées, en vertu du Régime, au 31 mars 1971.

NOMBRE DE PERSONNES ASSISTÉES
RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
AU 31 MARS 1971

Province	Services à l'enfance	Assistés sociaux*	Adulte dans les établissements	Total
Terre-Neuve	2,202	91,852	1,260	95,314
Île-du-Prince-Édouard	381	10,552	955	11,888
Nouvelle-Écosse	4,735	45,593	2,000	52,328
Nouveau-Brunswick	3,427	65,756	1,775	70,958
Québec	42,646	489,073	14,219	545,938
Ontario	17,604	364,046	27,153	408,803
Manitoba	5,004	75,763	3,244	84,011
Saskatchewan	3,493	68,338	5,759	77,590
Alberta	7,784	93,960	3,282	105,026
Colombie-Britannique	8,552	154,851	6,143	169,546
Yukon	336	280	53	669
CANADA	96,164	1,460,064	65,843	1,622,071

* Y compris personnes à charge.

nécessaires à l'analyse, à l'amélioration et à l'administration des programmes. Le groupe d'étude a également recommandé que le gouvernement fédéral, en collaboration avec les provinces, entreprenne des recherches plus approfondies sur les facteurs susceptibles d'influencer le coût des programmes de bien-être social sur l'application possible des techniques de rentabilité au bien-être social. Le rapport renferme un modèle de système de relevés statistiques pour l'assistance financière.

Au cours de la réunion de janvier 1971, les discussions des sous-ministres ont porté non seulement sur l'examen des rapports des groupes d'étude, mais également sur les problèmes soulevés dans le Livre blanc sur la sécurité de revenu, les problèmes de la jeunesse nomade, de l'usage des drogues à des fins non-médicales, du chômage, de l'assistance sociale et du mouvement interprovincial des assistés sociaux. Le groupe d'étude fédéral-provincial sur l'aliénation a présenté un rapport provisoire. Il a été décidé que ce groupe poursuivait ses études.

Au cours de leur réunion de janvier 1971, les ministres du Bien-être social ont examiné les rapports des groupes d'étude fédéraux-provinciaux et autorisé la publication des rapports des groupes d'étude pour une approche développementale de l'assistance publique et sur les coûts des programmes de bien-être social afin que le public puisse prendre connaissance des recommandations formulées dans ces rapports.

Les Ministres ont également étudié un document intitulé "Révision des propositions concernant les services d'assistance sociale et de bien-être", lequel réunissait les recommandations formulées dans le Livre blanc sur la sécurité de revenu, dans les rapports des groupes d'étude et les résolutions du Congrès des pauvres, tenu en janvier 1971. Le gouvernement fédéral a fait part de son intention d'entreprendre des consultations avec les provinces sur la modification du Régime d'assistance publique du Canada et de discuter de propositions précises lors de la future conférence des Ministres. Les domaines qui soulèvent le plus d'intérêt sont l'admissibilité à l'assistance sociale, les incitations financières, l'assistance suffisante, les procédures d'appel, le partage des frais, les services de bien-être social, les services d'emploi, ainsi que les domaines de la communication, de l'information et de l'administration.

Les Ministres ont également discuté du Conseil national du bien-être social, de l'usage des drogues à des fins non-médicales, du planning familial, des subventions de bien-être social et des procédures de divorce.

Le ministre de la Santé nationale et du Bien-être social a déposé un rapport sur la jeunesse itinérante et a déclaré que des décisions seraient prises dans un avenir très proche en ce qui concerne la création d'occasions d'emploi pour l'été de 1971. Les provinces seront préalablement consultées sur l'application de n'importe quel programme. Le Ministre a également déposé un communiqué donnant des précisions sur le programme mis sur pied pour traiter des problèmes liés à l'usage des drogues à des fins non-médicales. Les Ministres ont également pris

En ce qui concerne les normes budgétaires, le rapport conclut que bjectif principal des programmes d'assistance consiste à dispenser des estations qui permettront à leurs bénéficiaires de jouir d'un niveau de e satisfaisant, d'élever leur famille et de participer à la vie de la mmunauté. Les techniques dont on dispose actuellement pour définir s normes budgétaires offrent un moyen de formuler avec précision ces bjectifs et de les réaliser dans des programmes actuels.

Le groupe d'étude conclut qu'il est possible de simplifier nsidérablement les procédures de détermination de l'admissibilité. l'on adopte un système simplifié, il faudra, toutefois, effectuer de rands changements afin de restructurer les programmes d'assistance ublique ainsi que les systèmes de services sociaux. Le groupe d'étude ecommandait également que la détermination de l'admissibilité à assistance publique soit séparée de la dispensation des services sociaux que les assistés sociaux aient recours aux services sociaux lorsqu'ils désirent.

En ce qui concerne l'emploi, le groupe d'étude estime que bon mbre d'assistés sociaux préféreraient subvenir à leurs propres besoins. es services d'emploi et de réadaptation répondant aux besoins de ces ersonnes pourraient les aider à trouver le travail qui leur permettrait e gagner leur vie.

Le groupe d'étude a recommandé que des mesures soient prises our réduire la fréquence des trop-payés; que les personnes qui ont néficié de ces plus-payés les remboursent lorsqu'elles disposent de essources suffisantes ou lorsqu'il y a eu fraude; que ce rembourse- ent ne soit pas déduit des prestations subséquentes d'assistance, auf en cas de fraude, et que la Loi soit modifiée de façon à défalquer ériodiquement les trop-payés irrécupérables.

Le groupe d'étude recommandait également que les systèmes 'information prévus au sein des programmes de bien-être social ournissent les données qui contribueront à identifier et à définir les ouveaux problèmes sociaux et à faciliter la planification socio- conomique. Il a également proposé que les hauts fonctionnaires du ien-être social participent plus efficacement à la formulation de olitiques d'intérêt public portant sur la demande de l'aide et des ervices du bien-être social, et que l'on procède à la redéfinition des elations entre les programmes de bien-être social et les autres rogrammes relatifs aux soins, aux services correctionnels, l'éducation, aux loisirs et au développement économique, afin 'identifier les rôles et responsabilités de ces différents programmes t les moyens d'améliorer leur coordination.

Le groupe d'étude sur les coûts des programmes de bien-être social recommandé la constitution d'un groupe d'experts fédéraux-provinciaux fin de mettre au point un système d'information qui recueillerait des onnées et des caractéristiques normalisées sur les activités du bien- tre social pour chaque province et pour l'ensemble du pays. Ce système ngloberait les données sociales, économiques, démographiques et autres,

Les membres du personnel ont participé à la préparation du Livre blanc sur la sécurité de revenu au Canada qui fut déposé à la Chambre des communes, le 30 novembre 1970. Ce document contient un certain nombre de recommandations relatives au Régime d'assistance publique du Canada, ainsi que des lignes de conduite relatives à d'autres programmes ayant trait à la Sécurité de la vieillesse, au supplément de revenu garanti, au Régime de pensions du Canada et aux allocations familiales. Le Livre blanc proposait aux provinces de discuter des lacunes des programmes d'assistance sociale. Ces discussions avaient pour but d'introduire dans le Régime d'assistance publique du Canada des mesures plus énergiques en vue d'assurer l'admissibilité à l'assistance, des prestations suffisantes et de meilleures procédures d'appel et méthodes administratives. Des efforts étaient également censés être faits afin de définir plus clairement les services de bien-être social, d'élargir les conditions d'admissibilité à ces services, et d'assurer un meilleur partage des fonds à la fois pour les services communautaires et pour les projets d'adaptation au travail.

Pendant l'année, les consultants ainsi que d'autres membres du personnel ont continué à faire partie des groupes d'étude fédéraux provinciaux pour une approche développementale de l'assistance publique de même que sur le coût des programmes de bien-être social et sur l'aliénation.

Les sous-ministres provinciaux du Bien-être social se sont réunis à Ottawa, en juin 1970. Les questions qui étaient à l'ordre du jour de la réunion de juin portaient sur les procédures d'appel, l'assistance sociale aux personnes éprouvant des difficultés financières à la suite de grèves et débrayages, l'aide et les services à la jeunesse itinérante, l'utilisation de bons d'achat dans les programmes d'assistance sociale, la migration interprovinciale des assistés sociaux ainsi que le perfectionnement et la formation du personnel. Les groupes d'étude fédéraux-provinciaux ont présenté des rapports sur les progrès accomplis et ils ont décidé que des rapports définitifs seraient rédigés avant la conférence fédérale-provinciale des ministres et sous-ministres du Bien-être social prévue pour janvier 1971.

Les ministres et sous-ministres du Bien-être social ont tenu leur réunion à Ottawa, à la fin de janvier 1971. Les rapports définitifs des groupes d'étude pour une approche développementale de l'assistance publique et sur le coût des programmes de bien-être social avaient été terminés avant la réunion. Ces rapports ainsi que le Livre blanc sur la sécurité de revenu ont donné lieu à de longues discussions.

Le rapport d'étude sur une approche développementale de l'assistance publique traite des normes budgétaires, de la simplification des procédures d'admissibilité, des occasions d'emploi et des trop-payés versés au titre de l'assistance. Il commente également les relations entre les programmes d'assistance publique et les autres programmes socio-économiques et il formule des recommandations importantes dans chaque domaine étudié.

projets des provinces et les services de réadaptation prévus dans le dre des services de bien-être à la famille et à l'enfance ainsi que les rvices de soins communautaires et les établissements de soins spéciaux. e nombreuses consultations ont été dispensées dans ces différents maines au cours de l'année.

La tendance visant à améliorer les services de soins de jour s'est écisée à la suite de la publication rapport de la Commission royale enquête sur la situation de la femme, du Livre blanc sur la sécurité de evenu, et du rapport intitulé "Un million d'enfants" de la CELDIC Commission d'enquête sur les troubles affectifs et les difficultés 'apprentissage chez les enfants). On a également assisté au cours de année au renforcement de la tendance visant à faire participer les arents à l'élaboration de programmes et à l'élargissement du concept e soins de jour, de manière à inclure les soins supplémentaires qui ont requis pour de nombreuses raisons, notamment le besoin de béné- icier d'une expérience communautaire. Les soins de jour vont également tre dispensés à d'autres groupes tels que les malades mentaux et les dultes arriérés. Les Centres d'activités qui ont été ouverts dans uelques provinces permettent de ne pas confier ces patients aux tablissements et de leur procurer un meilleur mode de vie. Les soins e jour constituent également un complément important aux soins ispensés aux personnes âgées dans les établissements. A Toronto, à Ottawa et à Winnipeg, un petit nombre seulement de personnes âgées énéficient de soins qui leur sont dispensés pendant une partie de la ournée ou toute la journée avant d'entrer en établissement.

Les Services de bien-être social ont été dispensés à différents roupes, notamment aux enfants, aux personnes âgées et aux arriérés. l y a eu quelques tentatives d'organiser des services à l'intention des amilles et, notamment, de mettre au point des projets de vacances amiliales.

Depuis l'entrée en vigueur du Régime d'assistance publique du Canada, bon nombre d'améliorations ont été réalisées dans le domaine nstitutionnel. Ces améliorations comprennent l'augmentation des ommes versées, au titre du bien-être social, à des personnes se rouvant dans des établissements de soins spéciaux, les allocations 'assistance générale, le renforcement des mesures législatives sur a délivrance des permis, l'expansion des établissements privés de ien-être social et l'inclusion des établissements de soins à l'enfance armi ceux qui peuvent recevoir des contributions du gouvernement édéral. Au cours des dix dernières années, le nombre de lits disponibles ans les établissements de soins spéciaux a quadruplé alors que l'aide édérale versée à ces maisons a quintuplé. Les problèmes qui existent à présent dans ce domaine portent sur les relations existant entre les hôpitaux, les institutions mentales, les établissements de bien-être social ainsi que sur les relations actuelles entre le bien-être de l'enfance et les établissements correctionnels, et entre les établissements de bien-être social et les services de soins communautaires correspondants.

provinces aux régimes d'assistance, au cours de l'exercice financier 1970-1971. L'appendice décrit les régimes tels qu'ils étaient à la fin de l'année financière.

ADMINISTRATION DU RÉGIME

Le programme est administré par la Division du Régime d'assista publique du Canada, Direction générale de l'Assistance sociale. Cette Division est également chargée de l'administration du régime d'assistan chômage ainsi que des régimes d'assistance-vieillesse et d'allocations a aveugles et aux invalides. La Division comprend un bureau central où e emploie un personnel administratif et consultatif et d'un personnel sur place dans neuf provinces.

Le personnel sur place de la Division assume la responsabilité de mener sur place certaines études de nature administrative ayant pour bu de déterminer si les débours sont partageables, et de donner suite aux demandes de remboursement. Les représentants régionaux doivent auss assurer la liaison avec les autorités provinciales en les tenant au courar de l'interprétation à donner à la législation et aux politiques fédérales, ainsi qu'en les aidant à préparer leurs demandes de remboursement. Ils restent aussi en rapport avec les Services de vérification du ministère d Finances, à qui revient la responsabilité de la vérification annuelle des comptes du Régime.

Dans les accords avec les provinces, le Canada s'est engagé à mettre à leur disposition, là où ce sera possible et si les provinces en font la demande, des services consultatifs relatifs à l'amélioration et au fonctionnement des régimes d'assistance et des services de bien-être social. En fin d'année, la Direction était à même de fournir des service consultatifs relatifs au bien-être des Indiens, aux soins en établissement à la tenue et à la vérification des comptes, aux services de bien-être social, aux services de soins communautaires, aux projets d'adaptation au travail, à la réadaptation, au bien-être de la famille et de l'enfance, au programme et à l'administration de l'assistance publique, au développement communautaire ainsi qu'à la formation et au perfectionnement du personnel.

Au cours de l'année, l'Ontario et le Nouveau-Brunswick ont signé des accords aux termes de la Partie III du Régime, ce qui a eu pour effet d'accroître l'intérêt envers les projets d'adaptation au travail. Toutes les provinces, à l'exception de Terre-Neuve, ont donc conclu des accords aux termes de ladite Partie. L'Alberta et le Manitoba se sont intéressée à la réalisation de projets tandis que la Nouvelle-Écosse, le Québec, la Saskatchewan et la Colombie-Britannique menaient à bien quelques dix-sept projets.

Le Régime d'assistance publique du Canada regroupe les services de réadaptation sous la rubrique générale "Services de bien-être social". Dans les provinces, les services de réadaptation ayant trait au Régime d'assistance publique du Canada entrent dans deux catégories principales: les services de réadaptation professionnelle prévus dans les programmes

L'âge d'admissibilité à la pension de la Sécurité de la vieillesse ant abaissé à 65 ans, le programme d'assistance-vieillesse a été andonné, le 1er janvier 1970. Cela signifie que des personnes qui, atteignant 65 ans, auraient demandé de l'assistance en vertu du ogramme d'assistance-vieillesse, peuvent maintenant recevoir la nsion en vertu du programme de la Sécurité de la vieillesse.

spositions des accords conclus en vertu du Régime

Lorsqu'elles signent un accord en vertu du Régime les provinces engagent à respecter un certain nombre de conditions prévues par la i. Elles s'engagent à déterminer l'admissibilité d'une personne à assistance publique en se fondant sur une évaluation de ses besoins et e ses ressources et à faire profiter toute personne nécessiteuse de assistance publique dans une mesure ou d'une manière compatible vec ses besoins fondamentaux. On entend par besoins fondamentaux nourriture, le logement, l'habillement, le chauffage, les services utilité publique, les fournitures ménagères et les services répondant ux besoins personnels. L'évaluation des besoins et de ses ressources, ui est fondamentalement une méthode d'étude des budgets déficitaires our déterminer l'admissibilité au Régime et le montant de l'aide ccordée, tient compte des besoins des personnes qui demandent de aide, tout autant que de leur revenu et de leurs ressources disponibles.

Les provinces ont également accepté de ne pas imposer de période e résidence dans leurs territoires comme condition d'admissibilité à assistance publique; de plus, elles se sont engagées à prendre des spositions législatives établissant une procédure d'appel des décisions rises à l'égard des demandes d'assistance publique ou de l'octroi de ette assistance et à en informer, par une méthode efficace, les equérants ou les bénéficiaires.

En reconnaissance de l'importance qu'attache le Régime à la révention et à la réadaptation, les provinces se sont engagées à ontinuer, si elles le jugent nécessaire et opportun, à améliorer et étendre leurs services de bien-être social. La réalisation de ces erniers objectifs exige que l'on prenne diverses mesures comme embauche d'un personnel supplémentaire, l'obtention de renseignements, le partage de ceux-ci par la rédaction de rapports, l'usage e services de consultants et l'instauration de systèmes de relevés tatistiques.

escription des régimes provinciaux et municipaux

Le Régime d'assistance publique du Canada pose certaines conditions générales au partage du coût de l'assistance et des services de bien-être ocial. De façon générale, cependant, il autorise le paiement de contributions au coût des régimes mis en oeuvre et administrés de la façon qui convient le mieux aux circonstances particulières à chaque province et aux préférences locales. L'appendice donne une brève description des régimes de chaque province auxquels le gouvernement fédéral contribue, ainsi qu'un résumé des innovations importantes apportées dans les

Les frais des organismes bénévoles font aussi l'objet de contributions, dans la mesure où ces organismes reçoivent l'appui financier de la province ou de la municipalité. Parmi ces organismes, on compte les sociétés d'aide à l'enfance, de service social à la famille et d'autres organismes qui dispensent des services à l'enfance, ou de counselling familial et matrimonial, d'auxiliaires familiales et de soins de jour. En outre, bon nombre d'organismes bénévoles, nouvellement créés, dispensent des services d'information, d'orientation, de consultation et de prévention des crises dans le domaine de l'alcoolisme et de l'abus des drogues. Plusieurs de ces organismes sont connus sous le nom de cliniques de quartier ou de cliniques populaires. Environ 350 organismes bénévoles sont admissibles au partage des coûts en vertu du Régime.

Rapports entre le présent Régime et les régimes spéciaux

Un objectif fondamental du Régime est d'encourager le développement de régimes intégrés par l'intermédiaire desquels il sera possible d'aider toute personne nécessiteuse. Conformément à cet objectif, la Partie V du Régime autorise les provinces, selon leur gré, à ne plus accepter les demandes d'assistance-vieillesse et d'allocations aux aveugles et aux invalides et à commencer d'aider les vieillards, les aveugles et les invalides par l'intermédiaire du régime d'assistance générale. Les personnes qui sont déjà admissibles aux allocations accordées en vertu des anciens régimes pourront être placées sous un régime d'assistance générale pourvu qu'elles soient admissibles à des prestations comparables ou supérieures, en vertu du nouveau régime.

La Saskatchewan a cessé d'accepter les demandes d'assistance en vertu de régimes spéciaux le 1er avril 1966, et fournit maintenant son aide à la plupart des personnes nécessiteuses en vertu de son nouveau Régime d'assistance. L'Ontario a pris des mesures similaires, à partir du 1er avril 1967, et fournit son aide à la plupart des personnes nécessiteuses en vertu de son régime de prestations familiales. L'Alberta a cessé d'accepter les demandes en vertu des régimes spéciaux, à partir du 1er janvier 1968. Terre-Neuve a cessé d'accepter les demandes d'assistance-vieillesse et les demandes d'allocations aux invalides, à partir du 31 décembre 1967 et du 30 juin 1967, respectivement, et, dans la mesure du possible, accorde de l'aide à ces personnes en vertu d'un régime d'assistance générale. L'Île-du-Prince-Édouard a cessé d'accepter les demandes d'assistance-vieillesse, à partir du 1er avril 1967 et les demandes d'allocations aux invalides, à partir du 1er mai 1967. Une partie de l'aide accordée en vertu de ces deux régimes a été portée au régime d'assistance sociale. La Nouvelle-Écosse a cessé d'accepter les demandes d'assistance en vertu du régime d'allocations aux invalides, le 1er décembre 1968. Les invalides de cette province qui pouvaient avoir droit à des prestations comparables en vertu de son régime d'assistance sociale sont maintenant bénéficiaires de ce dernier régime. Le Québec a cessé d'accepter les demandes d'allocations aux aveugles et aux invalides, le 1er octobre 1970. Les personnes qui pouvaient avoir droit à des prestations sont maintenant bénéficiaires du régime d'assistance sociale.

rvices de bien-être social

Pour favoriser le développement de mesures de prévention et de éadaptation, le Régime autorise le partage des débours faits par les ovinces et les municipalités pour les services de bien-être social. a loi donne de ces services la définition générale suivante: services ui ont pour but d'atténuer, de supprimer ou de prévenir les causes et s effets de la pauvreté, du manque de soins à l'égard des enfants, ou e la dépendance de l'assistance publique. Ces services comprennent lus particulièrement le service social individuel, les services de éadaptation, de counselling, d'évaluation, de soins de jour, d'auxiliaires miliales et de développement communautaire. Ils ne comprennent pas s services qui concernent uniquement ou principalement l'enseignement, e domaine correctionnel, les loisirs, les services de soins médicaux ou ospitaliers. Les services administratifs de secrétariat et de commis ux écritures nécessaires à la prestation de services de bien-être social ntrent dans le champ d'application du Régime, de même que la forma- on du personnel, la consultation, la recherche et l'évaluation se apportant à des régimes de bien-être social. Ces dernières fonctions nt été incluses car elles représentent un moyen d'encourager les services augmenter l'efficacité de leur personnel et à faire une appréciation de eurs programmes par rapport à leurs objectifs.

L'un des aspects importants du Régime est qu'il insiste sur la écessité de prévenir les problèmes personnels et sociaux qui engendrent pauvreté, la désintégration de la cellule familiale et le besoin 'assistance publique. A ce titre, le Régime autorise les contributions u coût des services de bien-être social fournis non seulement aux per- onnes nécessiteuses mais aussi à celles qui pourraient le devenir s'il e leur était pas permis de profiter de ces services.

Le Régime est conçu pour favoriser l'amélioration des services ctuels et la création de nouveaux. A cet effet, le gouvernement fédéral articipe à l'excédent des déboursés effectués par les provinces et les unicipalités, pour une année courante, par rapport aux frais qu'elles vaient encourus au cours d'une période précédente désignée comme nnée de base; dans le cas des provinces, il s'agit de l'exercice 1964- 965. Ces frais partageables comprennent les salaires, les frais de éplacement, y compris l'assistance à des conférences ou séminaires, ne partie du coût de la formation du personnel et les frais de onsultation et de recherche.

Les contributions sont payables à la province lorsque l'assistance st fournie par des services ou des organismes approuvés par la rovince en vertu du Régime. La plupart des organismes qui profitent les contributions sont les services de bien-être social provinciaux et unicipaux. Ces derniers peuvent varier quant au nombre du personnel; ertains services n'emploient qu'un ou deux agents tandis que ceux des égions métropolitaines emploient plusieurs centaines de personnes. l y a quelque 225 municipalités qui demandent ainsi des remboursements en raison des services de bien-être social qu'elles fournissent et dont lles assument une partie des frais.

régimes de bien-être à l'enfance. Cette responsabilité est assumée conjointement par les autorités provinciales et les sociétés d'aide à l'enfance en Ontario, en Colombie-Britannique, au Manitoba et en Nouvelle-Écosse.

Soins en établissement

Les dispositions du Régime s'étendent aussi au coût des soins dispensés aux personnes nécessiteuses dans les établissements de bien-être social. Ces établissements, appelés foyers de soins spéciaux comprennent les foyers de vieillards, les foyers de soins infirmiers, les auberges pour les itinérants, les établissements pour enfants, les foyers pour mères célibataires et tous les autres établissements de bien-être social dont le principal objet est de fournir des services de garde, des soins personnels ou infirmiers ou des services de réadaptation sociale. Le Régime ne s'applique pas au coût des soins dispensés dans les hôpitaux, les établissements correctionnels ou les établissemeis dont le principal objet est l'enseignement. Les dispositions du Régime concernant les foyers de soins spéciaux existaient déjà dans la Loi sur l'assistance-chômage; les dispositions furent étendues afin d'inclure les établissements pour enfants tels que les centres d'accueil, les orphelinats, certaines maisons pour délinquants et les établissements de bien-être pour enfants physiquement ou mentalement handicapés.

En fin d'année, quelque 3,000 établissements disposant de plus de 113,000 lits étaient identifiés comme foyers de soins spéciaux. Ce nombre inclut 2,450 établissements pour adultes disposant d'environ 95,000 lits et 560 établissements pour enfants disposant d'environ 18,500 lits.

Soins médicaux

En vertu du Régime, le gouvernement fédéral peut rembourser aux provinces la moitié du coût des soins médicaux qu'elles fournissent aux personnes nécessiteuses. La définition de l'expression soins médicaux, qui est donnée dans la Loi, inclut les soins médicaux, chirurgicaux, obstétricaux, dentaires et infirmiers, y compris les médicaments, les pansements, les prothèses et tous les autres articles ou services associé à la distribution des services mentionnés. Les services assurés en vertu de programmes de soins médicaux dont les frais sont partagés par les gouvernements fédéral et provinciaux sont exclus. Actuellement, cette exclusion s'applique aux services assurés aux termes de la Loi sur l'assurance-hospitalisation et les services diagnostiques, aux autres soins hospitaliers fournis sur ordonnance médicale et aux services assurés par la Loi sur les soins médicaux dans toute province participante. Par conséquent, les principaux domaines qui relèvent du Régime d'assistance publique du Canada sont les soins optiques, dentaires et infirmiers, les médicaments et les fournitures médicales ainsi que le paiement de primes d'assurances au nom de ceux qui sont dans le besoin.

Le Régime est conçu pour favoriser l'instauration de mesures ɔssistance publique pour toute personne dans le besoin, quelle que soit cause de ce besoin. La loi précise cependant les principaux groupes ɔ personnes à qui l'assistance doit être fournie. Elle les décrit comme ɔs personnes qui ne peuvent subvenir convenablement à leurs propres ɔsoins par suite de leur incapacité d'obtenir un emploi, de la perte de ɔur principal soutien de famille, de la maladie, de l'invalidité ou de âge. Le Régime autorise également l'assistance aux personnes qui ont n emploi mais qui ont besoin d'un revenu supplémentaire.

Les régimes en vigueur pour aider les personnes nécessiteuses ɔnt connus sous différents noms selon les provinces: assistance sociale, ide sociale, allocations sociales, assistance générale, prestations ɔmiliales et assistance sociale générale. L'administration de ces égimes varie aussi d'une province à l'autre. A Terre-Neuve et au Nouveau-Brunswick, le gouvernement provincial s'occupe entièrement ui-même de l'administration de l'assistance. C'est également le cas n Saskatchewan, à l'exception de deux municipalités, Prince-Albert et Moose Jaw, et, au Québec, à l'exception de Montréal. En Nouvelle-Écosse, au Manitoba, en Alberta et en Ontario, l'assistance publique st administrée conjointement par les provinces et les municipalités. L'administration de l'assistance publique se fait de façon similaire dans l'Île-du-Prince-Édouard et en Colombie-Britannique. Toutefois, dans l'Île-du-Prince-Édouard, trois bureaux de bien-être social et la ville e Charlottetown, s'occupent également de l'administration de l'assistance ublique. En Colombie-Britannique, le Bureau provincial de l'assistance-ieillesse administre les allocations sociales supplémentaires versées aux énéficiaires d'une pension de Sécurité de la vieillesse. Dans les rovinces où l'assistance est assurée à la fois par les provinces et par eurs municipalités, les provinces assistent les personnes qui risquent l'être dans le besoin pendant longtemps, et les municipalités, celles ont les ennuis financiers ne sont que passagers.

Entretien des enfants

L'assistance accordée en vertu du Régime s'étend aussi aux enfants u adolescents de moins de 21 ans qui sont confiés aux soins ou à la garde l'une autorité chargée du bien-être à l'enfance ou qui ont été placés sous e contrôle et la surveillance d'une telle autorité. Il s'agit surtout l'enfants placés en foyers nourriciers par autorité de justice ou avec le consentement des parents. Les frais d'assistance auxquels le gouvernement fédéral peut participer comprennent les paiements effectués par la province aux foyers nourriciers (ces paiements suivent souvent des normes établies pour chaque groupe d'âges), les soins médicaux et les autres besoins des enfants. Les programmes admissibles en vertu du Régime comprennent ceux qui sont administrés par les autorités provinciales du bien-être à l'enfance et par les sociétés d'aide à l'enfance.

A Terre-Neuve, dans l'Île-du-Prince-Édouard, au Nouveau-Brunswick, au Québec, en Saskatchewan et en Alberta, les ministères provinciaux du Bien-être social sont chargés de l'administration des

CHAMP D'APPLICATION DU RÉGIME

Assistance aux personnes nécessiteuses

L'objectif premier du Régime est de favoriser l'instauration de mesures suffisantes d'assistance publique pour les personnes nécessiteu Il autorise le paiement de contributions au coût de l'aide accordée après une évaluation des besoins, évaluation qui tient compte non seulement du revenu et des ressources des personnes qui demandent de l'aide, mais aussi de leurs besoins et de ceux des personnes à leur charge. Cette façon de faire diffère de l'évaluation des ressources qui ne tient compte que du revenu et des biens considérés comme revenu, dans le contexte d'un régime à prestations fixes accordées en fonction d'un plafond de revenu déterminé.

Les principaux frais d'assistance auxquels le gouvernement fédéra peut participer en vertu du Régime ont trait aux besoins fondamentaux qu comprennent, selon la définition qu'en donne la Loi, la nourriture, le logement, l'habillement, le chauffage, les services d'utilité publique, le fournitures ménagères et les besoins personnels. En signant des entent en vertu du Régime, les provinces s'engagent à tenir compte de ces besoins lorsqu'elles déterminent l'admissibilité d'une personne à l'assistance publique. Ce sont les provinces qui, généralement, fixent le montant des allocations concernant la nourriture, l'habillement, les fournitures ménagères et les besoins personnels. Ces allocations varien selon le nombre de membres et la composition de la famille. Dans le ca d'autres biens essentiels comme le logement, le chauffage et des service d'utilité publique, les allocations correspondent généralement à ce que la personne doit effectivement payer pour se les procurer.

La disposition du Régime voulant que le gouvernement fédéral contribue au paiement du coût des services de bien-être social mis à la disposition des personnes nécessiteuses et des articles considérés comme besoins spéciaux fournis à ces personnes, démontre bien l'importance que le Régime attache à la réadaptation. Les services de bien-être social peuvent être payés à l'acte et comprennent le service social individuel, les services de réadaptation, de consultation, d'évaluation, d'auxiliaires familiales et de soins de jour. Les articles considérés comme des besoins spéciaux à l'achat desquels le gouvernement fédéral peut participer, comprennent les outils ou autres articles d'équipement essentiels pour que le bénéficiaire puisse obtenir un emploi ainsi que les articles nécessaires à sa sécurité, à son bien-être et à sa réadaptation. On compte parmi ces articles les fournitures ménagères, les réparations à la propriété, des aliments ou des vêtements spéciaux, ainsi que les articles nécessaires aux handicapés.

Le directeur du Régime d'assistance publique du Canada doit autoriser toutes les dépenses au titre des besoins spéciaux qui dépassent $500. Au cours de l'année, des contributions ont été versées pour des matériaux de construction servant à la réparation ou à l'agrandissement des habitations, pour l'installation d'appareils de chauffage, de systèmes de plomberie et de canalisation électrique, pour les fournitures ménagèr et pour des prothèses.

mière lecture, le 21 juin et est adopté, en troisième lecture, par la ambre des communes, le 8 juillet, et par le Sénat, le 12 juillet. L'avis la sanction royale est publié dans la Gazette du Canada, le 23 juillet 6.

glement et accords

Après l'adoption de la Loi, le gouvernement fédéral eut de longs retiens avec les provinces au sujet des termes d'un règlement et ccords en vue de la mise en oeuvre du Régime. Le Règlement, opté par décret Conseil le 26 janvier 1967, donne la définition de rtaines expressions, conformément aux prescriptions de la Loi, écise les dépenses auxquelles le gouvernement fédéral pourra parti- er et établit les principes fondamentaux selon lesquels seront fectués les paiements des demandes d'indemnité en vertu du Régime. s conditions figurent aux accords qui, en outre, décrivent les engage- nts pris par les provinces et par le Canada, aux termes du Régime. tableau suivant donne la date de la signature des accords avec les ovinces et avec le territoire du Yukon, en vertu de la Partie I du gime. Ces accords étaient tous rétroactifs au 1er avril 1966, pour s de partage des frais.

Terre-Neuve	-	30 mars 1967
Île-du-Prince-Édouard	-	30 mars 1967
Nouvelle-Écosse	-	22 mars 1967
Nouveau-Brunswick	-	5 avril 1967
Québec*	-	21 août 1967
Ontario	-	28 mars 1967
Manitoba	-	20 mars 1967
Saskatchewan	-	22 mars 1967
Alberta	-	30 mars 1967
Colombie-Britannique	-	23 mars 1967
Territoire du Yukon	-	16 décembre 1969

* L'accord avec le Québec porte sur l'article 19 du Régime qui précise que les termes de la Loi sur les programmes établis (Arrangements provisoires) s'appliquent au Régime et non aux quatre programmes d'assistance publique à frais partagés qui existaient auparavant.

le fonctionnement de tous les régimes mixtes de bien-être social, en préparation de nouvelles discussions au niveau ministériel.

A la suite de cette recommandation, une équipe de travail, compo des sous-ministres fédéral et provinciaux du Bien-être social et d'autr fonctionnaires de leurs ministères se réunit, en février 1964, pour décider des points dont il faudrait tenir compte en vue de mettre sur pi un régime d'assistance publique amélioré. En mai 1964, les ministres Bien-être social se réunirent à Ottawa pour étudier les propositions de l'équipe de travail. Ils recommandèrent que le gouvernement fédéral e les provinces travaillent à l'amélioration d'un régime intégré et global d'assistance publique générale fondé sur les besoins. Les ministres provinciaux exprimèrent également l'opinion que le gouvernement fédér devrait participer pleinement au coût des allocations aux mères, des soins médicaux et de l'administration.

Vers cette époque, les problèmes de la pauvreté devenaient une source d'inquiétude grandissante, ce qui milita en faveur de la mise en oeuvre d'un régime d'assistance publique et de services de bien-être social plus efficaces. On se rendait compte de plus en plus que les talents de nombreux Canadiens étaient gaspillés à cause de la pauvreté, de la maladie, d'une éducation et d'une formation insuffisantes et des possibilités inégales d'emploi. En élaborant son programme législatif de 1965, le gouvernement s'est appliqué tout particulièrement à mettre au point une série de mesures en vue d'améliorer les conditions de vie des personnes aux prises avec ces problèmes sociaux.

L'une des mesures proposées par le gouvernement dans le discour du trône, en avril 1965, a été le Régime d'assistance publique du Canada Celui-ci a été décrit comme un moyen pour le gouvernement fédéral et l provinces d'agir conjointement pour procurer de l'aide à ceux qui en ont le plus besoin. Les objectifs du régime seraient de faciliter l'octroi aux personnes nécessiteuses d'une aide proportionnée à leurs besoins et d'appuyer la mise en oeuvre de services de bien-être social conçus pour aider ces personnes à se suffire à elles-mêmes dans la mesure du possible.

Les ministres du Bien-être social se réunirent de nouveau, en avr 1965, pour étudier en détail les propositions faites par le gouvernement dans son Régime d'assistance publique du Canada, et ils en approuvèrent les dispositions fondamentales. A l'occasion d'une troisième réunion, tenue en janvier 1966, les ministres du Bien-être social ont fait d'autres propositions au sujet du champ d'application du régime; ils ont demandé, en particulier, qu'il soit étendu aux enfants et aux adolescents confiés au soins d'une autorité chargée du bien-être à l'enfance. L'entière collaboration fédérale-provinciale à la mise en oeuvre du Régime a assuré sa souplesse d'adaptation par tout le Canada et a garanti son acceptation par les provinces auxquelles revient la responsabilité administrative des programmes qui relèvent du Régime.

Le 4 avril 1966, le gouvernement saisit la Chambre des communes d'une motion portant sur la présentation du projet de la Loi sur le Régime d'assistance publique du Canada. Le projet de Loi est accepté, en

nière période, le gouvernement fédéral a dû verser de très fortes ventions aux provinces pour leur permettre d'absorber le coût de gimes d'assistance accru par un chômage généralisé.

Pour éviter qu'une situation semblable ne se reproduise après la conde Guerre mondiale, le gouvernement fédéral a institué, en 1940, régime contributif d'assurance-chômage qui est entré en vigueur le r juillet 1941. En 1945, le gouvernement fédéral a offert d'établir un gime d'assistance-chômage, dans le cadre d'un plan global de construction d'après-guerre, régime qu'il s'engageait à financer et dministrer en commun avec le régime d'assistance-chômage. pendant, le gouvernement fédéral et les gouvernements provinciaux réussirent pas à se mettre d'accord sur les termes du régime proposé 1945.

Aucun autre geste ne fut posé en ce domaine jusqu'en 1956, année le Parlement du Canada adopta la Loi sur l'assistance-chômage qui, ntrairement à ce qui avait été proposé en 1945, offrait un régime assistance à frais partageables qui continuerait d'être administré par s provinces et les municipalités. La Loi contenait à l'origine une sposition établissant un seuil aux contributions fédérales; cette disposi- on prévoyait que le gouvernement fédéral ne participerait aux dépenses régime que lorsque le nombre de bénéficiaires dépasserait un pour- ntage donné de la population. Cette condition avait pour objectif de niter la participation fédérale au coût de l'assistance aux chômeurs nployables. En 1957, le seuil fut supprimé et le régime a pris quelque u les apparences d'un régime d'assistance générale bien qu'il ait nservé un certain nombre de dispositions limitatives le rendant fort fférent des mesures globales d'assistance.

Le régime d'assistance-chômage différait des trois autres régimes éciaux en ce qu'il n'établissait aucune condition d'admissibilité, sauf elles du chômage et du besoin; de plus aucun plafond n'était fixé au ontant de l'assistance à laquelle le gouvernement fédéral s'engageait à rticiper. Les provinces étaient donc libres de choisir leur propre gime d'assistance générale en fonction de leurs besoins. Les fonds déraux servant de stimulants, les provinces étendirent leurs régimes assistance générale à un plus grand nombre de personnes et augmentè- ent le montant des prestations, au cours de la période de 1956 à 1966; nsi fut préparé le terrain pour la mise en oeuvre d'un régime unique 'assistance permettant d'accorder à toute personne nécessiteuse une de proportionnée à ses besoins.

istorique du Régime

A la conférence fédérale-provinciale de septembre 1963, convoquée our discuter d'une nouvelle mesure contributive de sécurité sociale ssociée au revenu, le Régime de pensions du Canada, on a reconnu la écessité de mettre en oeuvre un régime amélioré d'assistance publique. a question fut de nouveau débattue à la conférence fédérale-provinciale ui réunit les premiers ministres, en novembre 1963; on y recommanda établissement d'un groupe de travail fédéral-provincial pour étudier

progrès de l'industrialisation, vers la fin du XIX^{e} siècle et le début du XX^{e} siècle, que les régimes d'assistance publique ont vraiment pris de l'ampleur, dans notre société. Le gouvernement fédéral et les gouvern- ments provinciaux durent alors accepter la responsabilité d'un ensembl de mesures dont s'étaient chargés jusqu'alors des organismes et des établissements bénévoles ou encore des municipalités.

Au début, le gouvernement fédéral et les gouvernements provinciaux avaient décidé de laisser les municipalités s'occuper de l'assistance publique générale et de porter leur attention sur certains groupes facilement identifiables qu'ils estimaient avoir droit à une aide plus stable. Ainsi les veuves avec enfants à charge bénéficièrent des régimes d'allocations aux mères introduites par les gouvernements provinciaux pendant et après la Première Guerre mondiale.

En 1927, la Loi des pensions de vieillesse fut adoptée et devint le premier fruit d'une nouvelle collaboration entre les provinces et le gouvernement fédéral dans le domaine de l'assistance destinée à un groupe spécial. Aux termes de cette loi, le gouvernement fédéral s'engageait à payer la moitié du coût d'une pension, ne s'élevant pas à plus de $20 par mois, que les gouvernements provinciaux accorderaient aux personnes de 70 ans et plus qui répondaient aux dispositions de la Loi fédérale concernant la résidence et l'évaluation des ressources.

Les plus importantes modifications à la Loi ont été la majoration des contributions du gouvernement fédéral à 75 p. 100 des coûts en 1931; et, en 1937, l'inclusion parmi les pensionnés des aveugles de 40 ans et plus. En 1951, cette Loi est remplacée par deux régimes fédéraux-provinciaux d'assistance, soit la Loi sur l'assistance-vieillesse intéressant les personnes de 65 à 70 ans et la Loi sur les aveugles touchant les aveugles de plus de 21 ans (âge réduit à 18 ans en 1955). La Loi sur la sécurité de la vieillesse était adoptée la même année et autorisait le versement d'une pension uniforme à toutes les personnes de 70 ans et plus.

En 1954, la Loi sur les invalides était adoptée et elle permettait de lancer un troisième régime fédéral-provincial au profit des personnes atteintes d'invalidité totale et permanente. Comme dans le cas des deux autres mesures, la Loi sur les invalides exigeait une vérification des ressources de la personne avant qu'une pension ne lui soit versée. Cette vérification portait sur le montant du revenu et la valeur des biens. Comme dans le cas de l'assistance-vieillesse, le gouvernement fédéral payait 50 p. 100 du montant des allocations versées aux invalides. La Loi sur les aveugles différait des autres régimes d'assistance sociale en ce qu'elle autorisait le gouvernement fédéral à payer 75 p. 100 des frais et en ce qu'elle fixait un plafond de revenu plus élevé dans la détermination de l'admissibilité des aveugles aux prestations du régime.

Le gouvernement fédéral a également accordé des subventions aux provinces et aux municipalités à des fins d'assistance publique générale, durant deux périodes de dépression économique, immédiatement après la Première Guerre mondiale et pendant les années 30. Durant cette

ns en établissement

Le Régime autorise le gouvernement fédéral à partager les coûts
›portés par les provinces et les municipalités pour l'entretien des
-sonnes nécessiteuses dans une variété d'établissements résidentiels
bien-être social appelés collectivement foyers de soins spéciaux et
nprenant les foyers de vieillards, les maisons de soins infirmiers,
foyers pour mères célibataires, les auberges pour itinérants et les
blissements de soins aux enfants.

rvices administratifs et de bien-être social

Le Régime autorise le partage des débours pour consolider et
velopper les services administratifs des régimes d'assistance publique
des services connexes de bien-être social. Les services qui peuvent
ofiter de la participation fédérale comprennent les services de réadapta-
n, le service social individuel, les services de consultation,
valuation, d'adoption, d'auxiliaires familiales de soins de jour et de
veloppement communautaire.

en-être des Indiens

Le gouvernement fédéral et les gouvernements provinciaux peuvent
nclure des accords, en vertu de la Partie II du Régime, en vue de
xtention, moyennant le consentement des bandes d'Indiens, des régimes
ovinciaux de bien-être social aux Indiens qui habitent les réserves ou un
ritoire non organisé, dans les provinces. Le Régime prévoit une
rticipation fédérale selon une méthode spéciale de financement qui
nt compte des dépenses plus élevées qu'assument les provinces pour
re face à cette responsabilité.

ojets d'adaptation au travail

Le Régime prévoit, aux termes de la Partie III, la mise en oeuvre
s projets spéciaux d'adaptation au travail en vue d'accroître la motiva-
n et les aptitudes professionnelles des personnes qui n'ont pas pu
ofiter pleinement des programmes de formation ou qui ont des
fficultés exceptionnelles à obtenir ou à conserver un emploi.

NTÉCÉDENTS ET HISTORIQUE DU RÉGIME

volution de l'assistance publique au Canada

Le Régime d'assistance publique du Canada est né de l'intégration de
usieurs mesures d'assistance publique, en particulier de régimes
déraux-provinciaux, dont les allocations aux aveugles, l'assistance-
ômage et les allocations aux invalides. Un quatrième régime,
ssistance-vieillesse, ne s'applique plus, depuis le 1er janvier 1970,
ors que la pension de sécurité de la vieillesse est devenue payable à
rtir de 65 ans. Ces régimes à frais partagés faisaient suite eux-mêmes
de nombreuses mesures d'aide aux indigents. Certaines de ces mesures
montent au début de l'histoire des provinces, mais ce n'est qu'avec les

et à une seule structure administrative. Grâce au Régime d'assistance publique, les provinces peuvent, si elles le désirent, combiner en un seul régime quatre programmes fédéraux-provinciaux d'assistance: l'assistance-vieillesse, les allocations aux invalides, les allocations aux aveugles et l'assistance-chômage.

Assistance selon les besoins

Le Régime permet de calculer le montant de l'assistance accordée en fonction de l'évaluation des besoins financiers de la personne ainsi que de son revenu et de ses ressources, contrairement aux programmes "spéciaux" qui calculent l'assistance uniquement en fonction du revenu et des ressources. Aucune limite maximale n'est imposée aux prestations pour lesquelles le gouvernement fédéral souscrit dans une proportion de 50 p. 100.

Définition de l'assistance

La définition globale de l'assistance dans la législation fédérale insiste fortement sur la réadaptation. Elle comprend non seulement une gamme étendue de besoins matériels, mais aussi des soins médicaux, plusieurs besoins spéciaux et des services de bien-être.

Supplément du revenu

Un aspect important du Régime est qu'il autorise le paiement de contributions fédérales au coût de l'assistance supplémentaire versée en sus des prestations accordées en vertu des régimes de soutien du revenu comme la sécurité de la vieillesse (y compris le supplément du revenu garanti), le Régime de pensions du Canada, le Régime de rentes du Québec et l'assurance-chômage et d'autres revenus ou salaires.

Soins médicaux

Le gouvernement fédéral participe au coût des soins médicaux accordés aux personnes nécessiteuses. Ces services comprennent les soins médicaux, chirurgicaux, infirmiers, optiques et dentaires, les médicaments, les prothèses ainsi que d'autres services ayant trait à la santé. Dans la mesure où les services médicaux sont prévus par le régime national d'assurance médicale dans une province, les dispositions du Régime qui ont trait au partage des frais ne s'appliquent pas.

Service de bien-être à l'enfance

La participation fédérale s'étend aux débours pour subvenir aux besoins des enfants confiés aux soins des autorités chargées du bien-être à l'enfance. La plupart de ces enfants sont placés en foyers nourriciers.

RAPPORT ANNUEL SUR LE RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA POUR L'EXERCICE FINANCIER TERMINÉ LE 31 MARS 1971

Le Régime d'assistance publique du Canada a été adopté par le Parlement au cours de l'exercice 1966-1967 et il est entré en vigueur durant la même période. Il a reçu la sanction royale le 15 juillet 1966, avec effet rétroactif au 1er avril de la même année. Le Règlement en vertu de la Partie I du Régime, laquelle traite de l'assistance générale et des services de bien-être social, a été édicté par le gouverneur en conseil le 8 février 1967.

Le Régime a pour objectif de favoriser l'intégration, l'expansion et l'amélioration des régimes d'assistance publique provinciaux et municipaux, ainsi que l'amélioration et l'élargissement des services de bien-être social. Le Régime permet au gouvernement fédéral de participer, jusqu'à concurrence de 50 p. 100, aux frais partageables par les provinces ou les municipalités sous forme d'assistance publique et de services de bien-être social.

En août 1967, toutes les provinces avaient conclu des accords en vertu de la Partie I du Régime. Au 31 mars 1971, neuf provinces avaient signé des accords en vertu de la Partie III du Régime qui a trait aux projets d'adaptation au travail. Aucun accord n'a été signé, aux termes de la Partie II du Régime, laquelle a trait à l'assistance publique et aux services de bien-être social en faveur des Indiens vivant dans les réserves et sur un territoire non organisé.

OBJECTIFS ET PRINCIPAUX ASPECTS DU RÉGIME

Le régime d'assistance publique du Canada a deux grands objectifs: appuyer l'instauration de mesures suffisantes d'assistance publique pour les personnes nécessiteuses et favoriser l'amélioration et le développement des services de bien-être social conçus pour prévenir la pauvreté et la dépendance de l'assistance publique et pour en éliminer les causes.

Le Régime, les règlements et les accords qui en découlent n'ont été rendus possibles que grâce à une collaboration étroite et soutenue entre les ministres et les fonctionnaires des ministères fédéraux-provinciaux intéressés. Cet esprit de collaboration continue d'ailleurs à régner dans l'administration du Régime.

Les aspects principaux du Régime d'assistance publique du Canada sont les suivants:

Une approche globale

L'élaboration de régimes globaux et intégrés d'assistance générale est favorisée pour que les provinces puissent satisfaire les besoins de diverses catégories de personnes en n'ayant recours qu'à un seul régime

L'honorable John Munro, C.P., député
Ministre de la Santé nationale et du
Bien-être social
Ottawa

Monsieur le Ministre,

Conformément aux dispositions de l'article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1971.

Je vous prie d'agréer, Monsieur le Ministre, l'assurance de mes sentiments dévoués.

Le sous-ministre du Bien-être social

Joseph W. Willard

Joseph W. Willard

RAPPORT ANNUEL

SUR LE

RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA

EXERCICE FINANCIER TERMINÉ LE 31 MARS 1971

GIME D'ASSISTANCE
IQUE DU CANADA

79 — RAPPORT ANNUEL

Santé et Bien-être social Canada
Health and Welfare Canada

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ADA ASSISTANCE PLAN 71-72 ANNUAL REPORT



Health and Welfare Canada
Santé et Bien-être social Canada

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His Excellency the Right Honourable Roland Michener, P.C., Q.C., Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to Your Excellency the Annual Report on the administration of the Canada Assistance Plan for the fiscal year ended March 31, 1972.

Respectfully submitted,

The Honourable Marc Lalonde
Minister of National Health and Welfare

The Honourable Marc Lalonde
Minister of National Health and Welfare

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1972.

Respectfully submitted,

A.W. Johnson
Deputy Minister of National Welfare

INTRODUCTION

Previous Annual Reports on the Administration of the Canada Assistance Plan have included an historical review and an explanation of the philosophy expressed in the Plan. This background material has now been produced in the form of a booklet, and has not, therefore, been included in this Annual Report.

During the 1971-72 fiscal year, the CANADA ASSISTANCE PLAN proved to be a dynamic instrument by means of which the provinces were able to continue improving their social assistance programs and extending and developing welfare services. Under the Plan, contributions amounting to 50 per cent of shareable costs are made towards provincial and municipal expenditures for public assistance and welfare services.

This dynamism has been basic to the Plan since it was first formulated in 1966 in response to provincial requests that the federal government increase its contribution to general assistance programs. At the time, it was felt that the existing categorical programs were too restrictive in defining eligibility, allowable income and the amounts of allowances, and that they did not take into consideration the variable needs of an individual and his family.

The categorical programs were the Old Age Assistance Act (1951), the Disabled Persons Act (1954), the Blind Persons Act (1957), and a fourth, more comprehensive approach enacted in 1956, the Unemployment Assistance Act. This program differed from the other three in that it did not specify the conditions of eligibility (other than unemployment and need) or place a ceiling on the allowances to be shared. The federal government shared in the costs of those programs which were administered by the provinces.

The CANADA ASSISTANCE PLAN Act was developed in consultation with the provinces and became one of Canada's most important measures in the fight against poverty because of its three main objectives:

- to assist the provinces in developing comprehensive programs to assist all persons who are in need for whatever cause;

- to encourage the provision of adequate levels of assistance which would permit recipients to maintain a decent standard of living;

- to support the development of welfare services which would encourage and assist recipients to become self-supporting.

Several amendments to the CANADA ASSISTANCE PLAN Regulations were approved during the 1971-72 fiscal year to enable the federal government to better meet the ever evolving needs of the provinces in their continuing efforts to improve their social assistance and welfare services programs. Amendments were proposed to enable greater federal sharing in day care services and work activity projects.

In addition an administrative reorganization of the Canada Assistance Plan Directorate was initiated during the year in order to improve the financial and consultative services available to the provinces under the Plan.

Day Care

During the year, the federal government increased its interest in the development of community services to support the family as the basic social unit of society. Day care of children is considered an important element of such services.

The critical need for day care services in Canada was pointed up by the Royal Commission on the Status of Women. The Canadian Conference on Day Care in 1971 also recommended that the federal government increase its participation in the provision of day care services. Representations were made by the Federation of Business and Professional Women's Clubs.

Since the low income family is most vulnerable to disruptive influences in modern society, government attention was focussed through the CANADA ASSISTANCE PLAN. A submission was therefore prepared proposing a wider base of sharing the costs of day care services and the establishment of a national Day Care Information Centre. This was considered by Cabinet towards the close of the fiscal year, and approved early in the 1972-73 fiscal year.

Work Activity

At the end of the fiscal year, increased federal sharing in the cost of work activity projects was approved by the Government to encourage greater use of this rehabilitative measure; the Regulations will be amended to reflect the changes during the next fiscal year. The federal government will be able to share in the costs of:

- salaries and travelling expenses of staff,
- allowances paid to participants,
- renting or buying equipment or the depreciation on this equipment; rental of land or premises,
- materials used in carrying out the projects, and other operational costs.

It is anticipated that the provinces will be developing more projects of this nature during the next fiscal year. In this way, the federal and provincial governments will be able to assist in a more concrete way those persons who have been left out of the mainstream of today's technological society.

Sharing in Overpayments

Overpayments occur mainly as a result of a client's forgetfulness or failure to understand what is required of him or because of an administrative error on the part of welfare officials. There are very few cases of fraud. When such overpayments were discovered, provincial welfare departments were obliged to return the federal share, whether recovery was made or not. Under amendment SOR 71-96 to the Regulations, when provinces have presented an acceptable plan for the prevention and recovery of overpayments, Canada can share in uncollected overpayments (i.e. there need be no reimbursement of the federal share).

The federal government has approved such plans in the Yukon and all provinces except Ontario. A time limit has been set for reviewing these plans to determine their effectiveness.

Sharing in Computer Costs

Under amendment SOR 71-96 to the welfare services provisions of the Regulations, federal sharing in computer costs provided to a provincial department of welfare by a central government agency was approved.

Previously, computer costs for welfare services were shareable only if they were provided within the Department providing the welfare service. If the Department of Welfare used central computer services, for example, the costs were not heretofore shareable.

It is anticipated that this amendment will facilitate more effective planning and control by municipal, provincial and federal governments by enabling the departments concerned to identify new needs quickly, analyze alternative solutions and make policy and program decisions with a minimum of delay.

Advance Payments

In previous years, the governments of the provinces and the Yukon Territory totalled their costs for social assistance and welfare services programs and submitted a monthly claim to the federal government. Under amendment SOR 71-96 to the Regulations, provincial costs may be estimated and an advance payment made by the federal government, thereby reducing the cost to the provinces of interest charges they were obliged to incur under the earlier system.

Administrative Reorganization

A reogranization of the Canada Assistance Plan Directorate and of the Social Allowances and Services Branch was begun during this fiscal year. A clearer distinction was made between the group of consultants dealing with the administration of financial assistance and those whose work relates primarily to the welfare services field.

Additional personnel were added to enable the department to respond in a more efficient manner to the requests of provinces, municipalities, voluntary agencies and concerned citizens across Canada for consultative advice with a variety of policy and administrative issues.

In addition, an Operations Planning and Evaluation Division was established to coordinate planning efforts throughout the entire Branch and to ensure that the Canada Assistance Plan responds appropriately to changes in provincial and municipal welfare programs.

A Welfare Information Services Division was set up within the Branch to implement recommendations made in a recent federal-provincial report on the costs of welfare programs. The intent is to improve the collection of data concerning Canadian welfare programs which could be used by all those who administer, plan and develop welfare programs.

IMPORTANT CHANGES IN PROVINCIAL PROGRAMS

Integration of Social Services with Health and Other Community Services

It has been recognized during the past few years that many of the services offered by welfare and health departments are similar in nature and often have common aims and common clients. As a result, several provinces have moved to consolidate the existing services, and to deliver them from locations easily accessible to those who need them.

Two types of changes took place in consequence. There was an increase in the number of centres offering integrated services directly to clients, and these centres were often located in or close to commercial shopping centres. To facilitate these changes, provincial departments were being established which combined and integrated the various professional service specialities. Legislation for this purpose was enacted in Quebec and Alberta during the year. Earlier, Manitoba and New Brunswick took similar steps. This trend is indicative of the attempts that are being made to solve the problems that arise when several departments of government offer related but uncoordinated services to the same group of clients.

Extension of Welfare Services

In recent years, individuals and especially family units have been encountering new problems arising from the many and varied changes occurring in modern society. During the year, closer attention was given to such problems as family breakdown, the non-medical use of drugs especially by our youth, and budget management.

The result has been an increase in the listing in the Federal-Provincial Agreements of agencies which offer counselling, and especially credit counselling services. A growing number of day care agencies and other community-based service agencies designed to assist family units in coping with present-day demands and pressures were also listed in the Agreements for cost sharing.

The increased cost of such services is reflected in Chart 6 on page 16.

MEETINGS WITH THE PROVINCES

As previously mentioned, one of the main objectives of the CANADA ASSISTANCE PLAN is to assist the provinces in developing and improving the social welfare programs for which they are responsible. Consultation between the two senior levels of government plays a major part in this process.

The federal and provincial welfare ministers met in June 1971. The conference was convened at the request of the First Ministers at the Constitutional Conference so that the ministers of welfare might make a report on their further discussions of major income security matters to the conference of First Ministers which was held later that month. The major points discussed were the proposed changes in the Family Allowances Act, the Canada Pension Plan, and the Canada Assistance Plan.

Representatives of provincial child welfare divisions held their annual meeting, with the Canada Assistance Plan consultant on Child Welfare acting as secretary. Subjects of mutual concern in child welfare, such as the integration of child welfare services and services to young offenders, interprovincial and international adoptions and the problem of battered children, were the major items on the agenda. Changes in legislation, policies and procedures within provinces as well as information on new programs were presented and reviewed.

In addition to these Ministerial and other formal meetings, the regular day-to-day discussions between federal and provincial officials continued. Federal consultants visited all provinces to assist with the resolution of technical and administrative problems, and to keep informed on a wide variety of provincial and municipal programs.

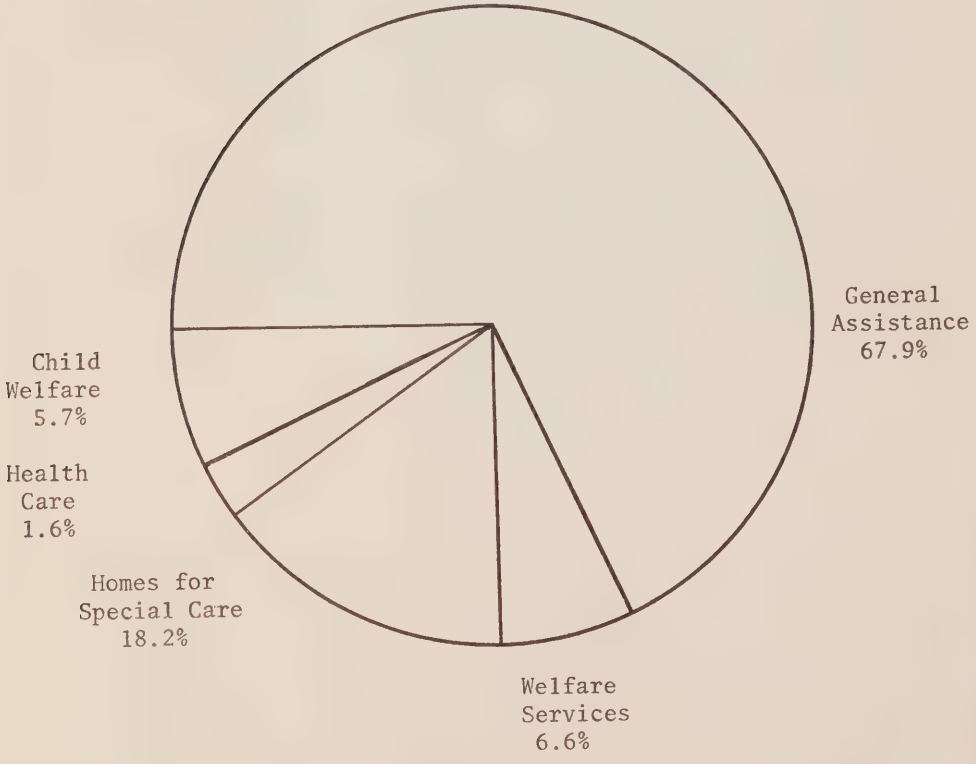
CASELOAD AND

FINANCIAL TABLES

Federal Payments to Provinces

Federal payments to the provinces in 1971-72 showed a significant increase over the payments made in 1970-71. (See Tables on pages 18 and 19.) The main areas of growth were general assistance, care in a welfare institution, and welfare services. Child welfare costs were relatively stable, while health care costs for needy persons declined.

ALLOCATIONS OF EXPENDITURES SHARED
UNDER THE CANADA ASSISTANCE PLAN
FISCAL YEAR 1971-72



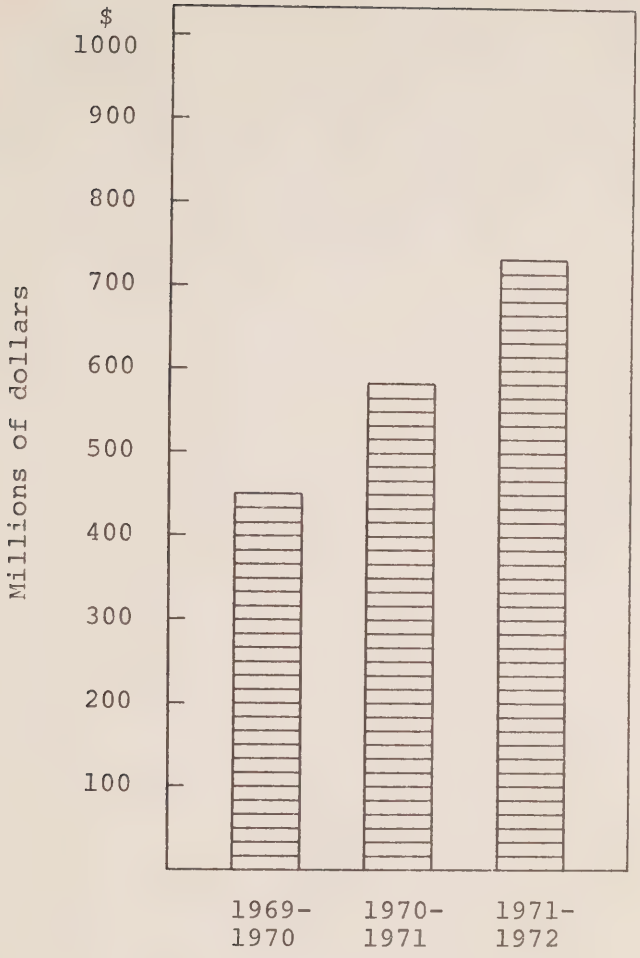


CHART 1: TOTAL FEDERAL PAYMENTS UNDER THE CANADA ASSISTANCE PLAN

General Assistance

The unusual growth in general assistance caseloads and costs which began in May, 1970, continued steadily and independently of normal seasonal fluctuations until August, 1971, when a downturn occurred in numbers of recipients in British Columbia, followed somewhat later by a similar development in Ontario. This slowing of the growth in numbers of cases was somewhat offset on the cost side by increases in assistance rates. The increase in the federal share of assistance costs for the year was over $90 million, an increase of 21 per cent over the year 1970-71 when assistance costs rose 35 per cent over the preceding year.

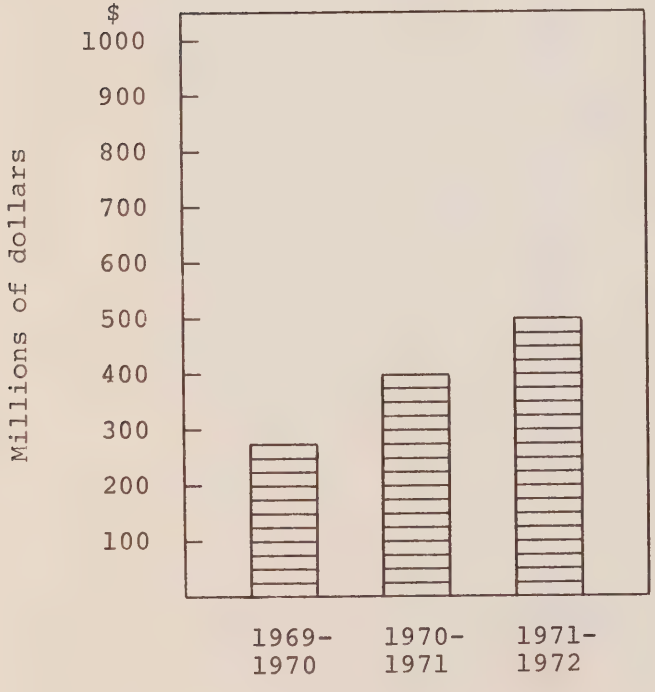


CHART 2: GENERAL ASSISTANCE COSTS - FEDERAL SHARE

Homes for Special Care

The cost of operating homes for special care has risen sharply during the past three years; the number of homes has increased, as has the number of beds in the homes. On the other hand, the incomes of persons in the homes have not usually increased at the same rate. Approximately 60 per cent of the residents of the homes are pensioners who have fixed incomes. As a result, the federal share of maintaining needy persons in homes for special care has increased.

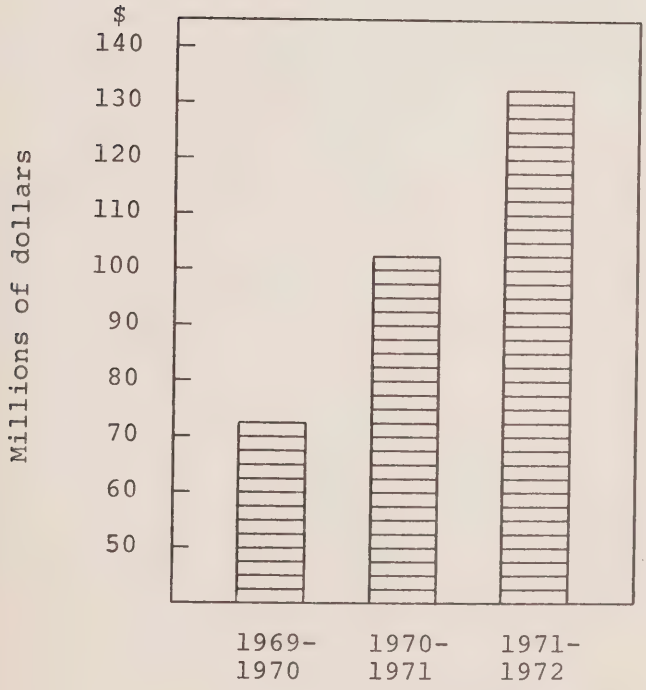


CHART 3: COSTS OF HOMES FOR SPECIAL CARE - FEDERAL SHARE

Child Welfare

Child welfare costs grew marginally, partly as a result of a small decline in the number of adoptable children in care. This has come about as a result of the declining birth rate, and the larger number of unwed mothers keeping their children, as well as an increase in the demand for adoptable children.

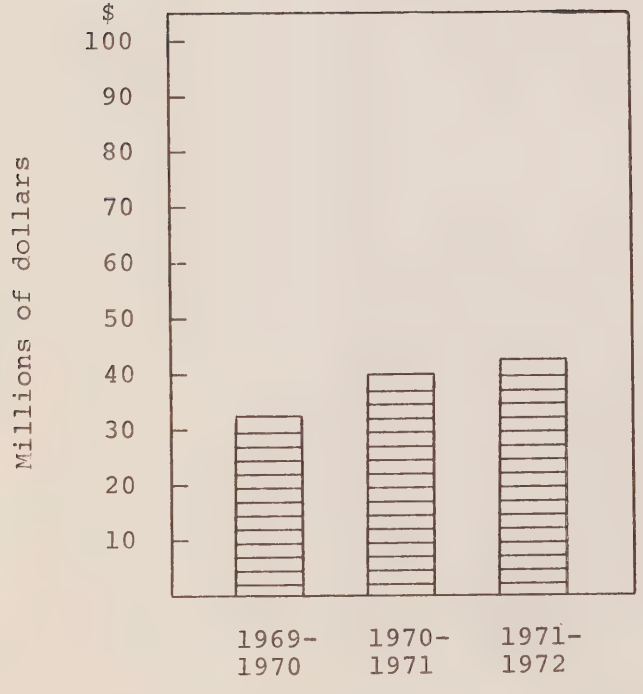


CHART 4: CHILD WELFARE COSTS - FEDERAL SHARE

Health Care

Health care costs for assistance recipients have fallen since 1968, as the provinces established provincial health insurance programs for all their citizens. Assistance recipients' basic health care costs are now covered under the provinces' health insurance programs, the costs of which are shared by the federal government through the Medical Care Act. Only those health care services which are not insured services under the Medical Care Act are now shareable under the CANADA ASSISTANCE PLAN, on condition that the services are provided to persons in need.

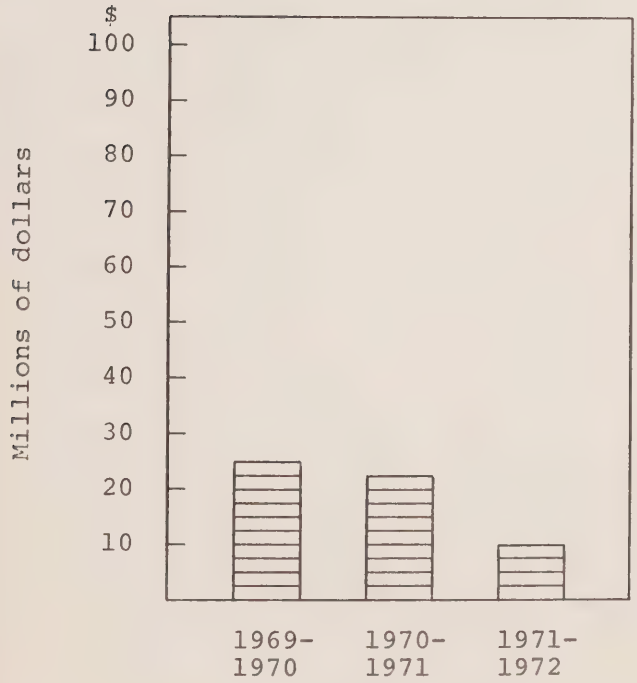


CHART 5: HEALTH CARE COSTS FOR NEEDY PERSONS - FEDERAL SHARE

Welfare Services

Welfare services are described as services that have as their object the lessening, removal or prevention of the causes and effects of poverty, child neglect or dependence upon public assistance. More specifically, they include rehabilitation services, casework, counselling and assessment services, homemaker and day care services, and community development. Administrative, secretarial and clerical functions associated with the provision of welfare services and the administration of assistance are covered, as are staff training, consultation, research and evaluation associated with welfare programs.

Welfare services costs have risen rapidly as services such as day care, family and credit counselling, and homemakers services have expanded significantly to meet public need. Additional staff were required to meet the needs of the increased number of persons requiring public assistance, and to provide welfare services. Rising salary and benefit costs for persons employed in the welfare service field also added to the increase in costs.

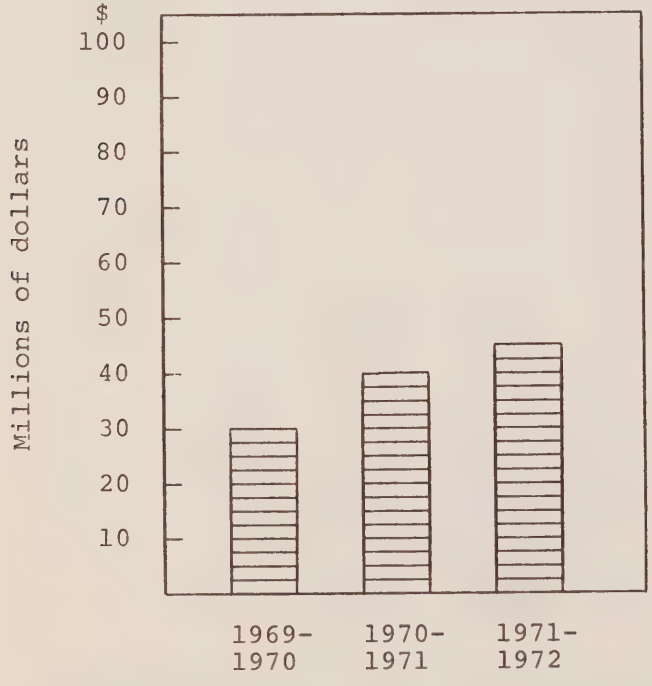


CHART 6: WELFARE SERVICES COSTS - FEDERAL SHARE

The Work Activity Program

The first work activity project was approved in 1968. During the year greater efforts were made to prepare long-term assistance recipients for reentry to the labour market. During 1971-72 there were 29 projects in operation in 7 different provinces involving approximately 1,100 persons. As the provinces gain more experience with the methodology and the techniques involved in establishing and operating such projects, it is expected that the number of projects will increase further.

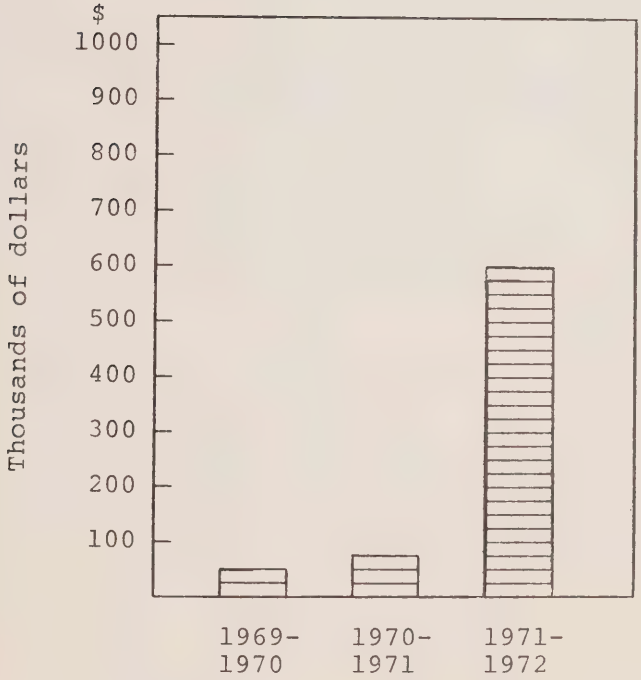


CHART 7: WORK ACTIVITY PROJECT COSTS - FEDERAL SHARE

TABLE 1

FEDERAL PAYMENTS TO THE PROVINCES
UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1971-1972

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	20,545	2,135	845	1,220	813	-	25,558
Prince Edward Island	1,702	1,897	184	29	229	-	4,041
Nova Scotia	13,727	3,914	1,630	256	2,330	-	21,857
New Brunswick	14,494	2,139	1,118	851	1,627	-	20,229
Quebec*	168,270	74,570	13,350	1,000	14,000	315	271,505
Ontario	148,199	31,478	13,404	1,222	16,725	7	211,035
Manitoba	23,640	5,518	2,213	1,868	3,065	-	36,304
Saskatchewan	18,395	3,025	1,103	1,593	1,168	22	25,306
Alberta	32,990	2,377	3,364	443	3,488	146	42,808
British Columbia	51,546	5,533	3,982	3,387	4,018	109	68,575
Yukon Territory	66	-	42	-	51	-	159
TOTAL	493,574	132,586	41,235	11,869	47,514	599	727,377

*Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance (estimated).

TABLE 2

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1970-1971

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	17,664	1,439	708	1,464	691	-	21,966
Prince Edward Island	1,591	1,735	197	149	94	-	3,766
Nova Scotia	10,169	3,469	1,221	229	1,646	9	16,743
New Brunswick	11,028	1,923	954	1,337	-	-	15,242
Quebec*	118,223	53,620	12,702	11,529	10,500	-	206,574
Ontario	116,312	29,714	13,842	992	15,303	-	176,163
Manitoba	20,787	1,083	1,977	1,585	2,755	-	28,187
Saskatchewan	14,825	2,861	981	1,111	818	25	20,621
Alberta	30,528	1,735	3,481	404	3,044	-	39,192
British Columbia	49,811	5,781	4,017	3,275	5,316	7	68,207
Yukon Territory	128	150	254	53	186	-	771
TOTAL	391,066	103,510	40,334	22,128	40,353	41	597,432

*Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

TABLE 3

NUMBER OF PERSONS BEING ASSISTED UNDER THE CANADA ASSISTANCE PLAN AS AT MARCH 31, 1972

Province	Child Care	Assistance Recipients*	Adult Institutions	Total
Newfoundland	2,020	80,574	1,374	83,968
Prince Edward Island	491	15,913	930	17,334
Nova Scotia	3,555	52,278	2,407	58,240
New Brunswick	3,274	61,717	1,815	66,806
Quebec	41,253	462,571	13,821	517,645
Ontario	17,132	333,584	22,215	372,931
Manitoba	4,836	78,544	4,218	87,598
Saskatchewan	3,520	69,604	6,140	79,264
Alberta	7,530	88,983	3,041	99,554
British Columbia	8,116	134,198	5,647	147,961
Yukon Territory	635	1,291	68	1,994
Canada	92,362	1,379,257	61,676	1,533,295

* Including dependants

TABLEAU 3

NOMBRE DE PERSONNES ASSISTÉES
REGIME D'ASSISTANCE PUBLIQUE DU CANADA
AU 31 MARS 1972

Province	Services à l'enfance	Assistés sociaux*	Adultes dans les établissements	Total
Terre-Neuve	2,020	80,574	1,374	83,968
Île-du-Prince-Édouard	491	15,913	930	17,334
Nouvelle-Écosse	3,555	52,278	2,407	58,240
Nouveau-Brunswick	3,274	61,717	1,815	66,806
Québec	41,253	462,571	13,821	517,645
Ontario	17,132	333,584	22,215	372,931
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Colombie-Britannique	8,116	134,198	5,647	147,961
Yukon	635	1,291	68	1,994
CANADA	92,362	1,379,257	61,676	1,533,295

* Y compris personnes à charge

TABLEAU 2

PAIEMENTS FÉDÉRAUX AUX PROVINCES
EN VERTU DU REGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNEE FINANCIÈRE 1970-1971

Province	Assistance générale	Établissement de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Partie III Adaptation au travail	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	17,664	1,439	708	1,464	691	-	21,966
Île-du-Prince-Édouard	1,591	1,735	197	149	94	-	3,766
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Yukon	128	150	254	53	186	-	771
TOTAL	391,066	103,510	40,334	22,128	40,353	41	597,432

*Montants versés au Québec par le ministère des Finances, (Évaluations), en vertu de la Loi sur les programmes établis (Arrangements provisoires).

TABLEAU 1

PAIEMENTS FEDERAUX AUX PROVINCES
EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNEE FINANCIÈRE 1971-1972

Province	Assistance générale	Établissement de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Partie III Adaptation au travail	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	20,545	2,135	845	1,220	813	-	25,558
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Nouvelle-Écosse	13,727	3,914	1,630	256	2,330	-	21,857
Nouveau-Brunswick	14,494	2,139	1,118	851	1,627	-	20,229
Québec*	168,270	74,570	13,350	1,000	14,000	315	271,505
Ontario	148,199	31,478	13,404	1,222	16,725	7	211,035
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Alberta	32,990	2,377	3,364	443	3,488	146	42,808
Colombie-Britannique	51,546	5,533	3,982	3,387	4,018	109	68,575
Yukon	66	-	42	-	51	-	159
TOTAL	493,574	132,586	41,235	11,869	47,514	599	727,377

*Montants versés au Québec par le ministère des Finances, (Évaluations), en vertu de la Loi sur les programmes établis (Arrangements provisoires).

Projets d'adaptation au travail

Le premier projet d'adaptation au travail a été approuvé en 1968. Au cours de l'année, des efforts considérables ont été faits pour préparer les bénéficiaires à long terme de l'assistance publique à reprendre place sur le marché du travail. Au cours de l'année 1971-1972, 29 projets étaient en cours de réalisation, dans sept provinces, environ 1,100 personnes y participaient. A mesure que les provinces acquièrent plus d'expérience dans la méthodologie et les techniques nécessaires à l'établissement et à la réalisation de ces projets, il est probable que le nombre de projets augmentera encore.

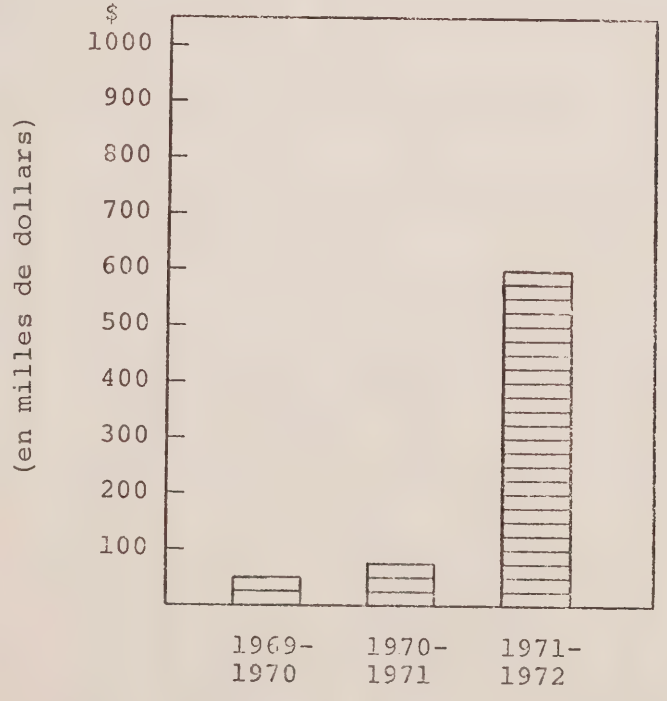


DIAGRAMME 7: COÛTS DES PROJETS D'ADAPTATION AU TRAVAIL - CONTRIBUTION FÉDÉRALE

Services du bien-être social

Les services du bien-être social ont pour objet d'atténuer, de supprimer ou d'empêcher les causes et les effets de la pauvreté, de l'abandon des enfants ou du recours à l'assistance publique. Les services du bien-être social comprennent tout particulièrement des services de réadaptation, d'aide individuel de counselling, d'évaluation, d'auxiliaires familiales, de garderie et de développement général de la collectivité. Ces services assument également des fonctions administratives et de secrétariat, liées à la prestation de services de bien-être social et à l'administration de l'assistance, de même que la formation du personnel, la consultation, la recherche et les études relatives aux programmes de bien-être social.

Les dépenses de services du bien-être social se sont accrues rapidement, car des services comme les garderies, les conseillers familiaux et budgétaires, les services d'auxiliaires familiales ont pris une extension importante pour répondre aux besoins du public. Du personnel supplémentaire était nécessaire pour servir un nombre accru de personnes faisant appel à l'assistance publique et pour assurer les services du bien-être. La hausse des traitements et des bénéfices marginaux des personnes travaillant dans le domaine des services du bien-être social ont également concouru à l'augmentation des dépenses.

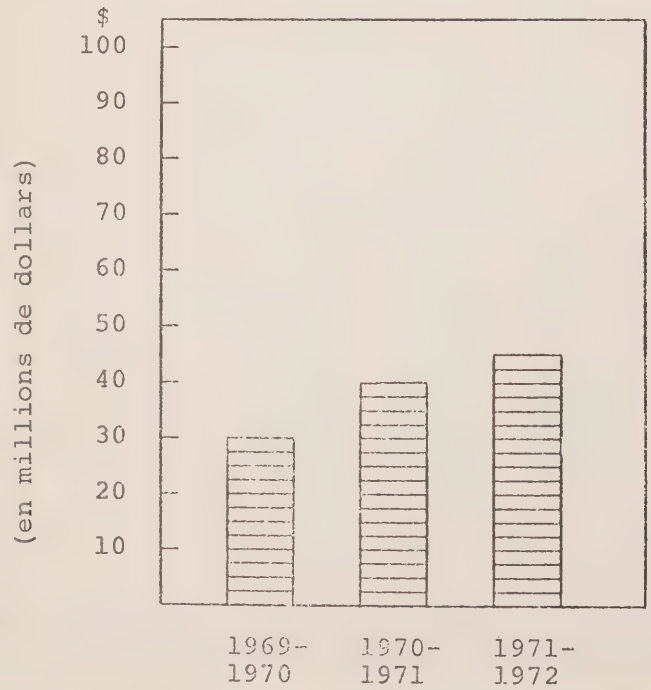


DIAGRAMME 6: COÛTS DES SERVICES DU BIEN-ÊTRE SOCIAL - CONTRIBUTION FÉDÉRALE

Soins médicaux

Le coût des soins médicaux pour les bénéficiaires de l'assistance publique a diminué depuis 1968, les provinces ayant établi des régimes d'assurance-maladie pour tous leurs citoyens. Les frais de base des soins médicaux des bénéficiaires de l'assistance publique sont maintenant couverts en vertu des régimes d'assurance-maladie des provinces, dont les frais sont payés partiellement par le Gouvernement fédéral, en vertu de la Loi sur les soins médicaux. Seuls les services de soins médicaux qui ne sont pas des services assurés conformément à la Loi sur les soins médicaux peuvent maintenant être partagés en vertu du RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, à condition que les services soient dispensés aux personnes nécessiteuses.

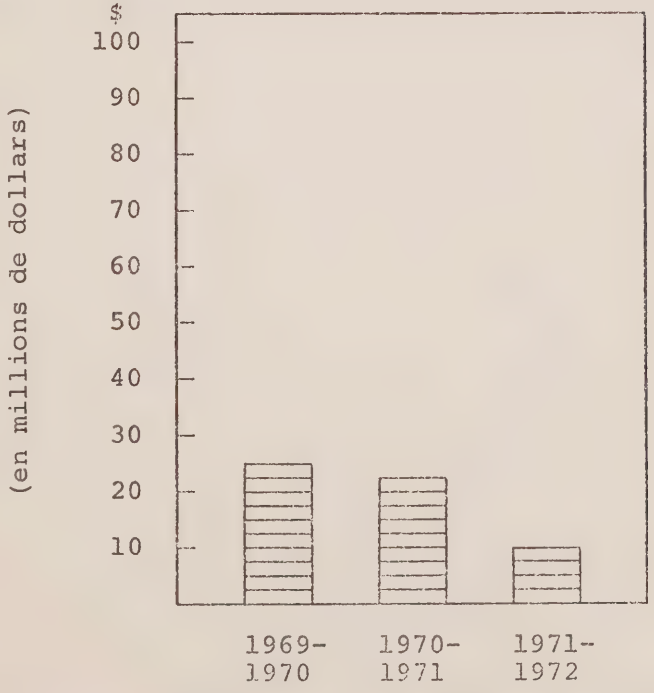


DIAGRAMME 5: COÛTS DES SOINS MÉDICAUX POUR PERSONNES NÉCESSITEUSES - CONTRIBUTION FÉDÉRALE

Services de bien-être à l'enfance

Le coût des services de bien-être à l'enfance à faiblement augmenté, en partie à cause d'une baisse minime du nombre d'enfants disponibles pour adoption. Cette baisse est due à une diminution du taux des naissances, du nombre de mères célibataires qui gardent leur enfant, de même qu'à l'accroissement du nombre de personnes désirant adopter un enfant.

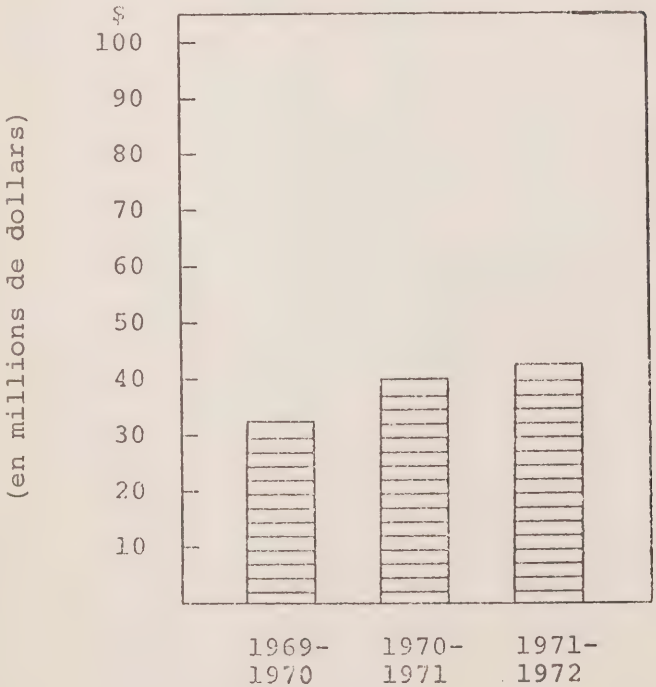


DIAGRAMME 4: COÛTS DES SERVICES DE BIEN-ÊTRE À L'ENFANCE - CONTRIBUTION FÉDÉRALE

Établissements de soins spéciaux

Le coût d'exploitation des établissements de soins spéciaux a monté beaucoup au cours des trois dernières années; le nombre d'établissements a augmenté, ainsi que celui des lits. D'autre part, les revenus des personnes qui y vivent n'ont pas habituellement été augmentés au même taux. Environ 60% des résidents de ces établissements sont des retraités qui ont des revenus fixes. Par conséquent, la participation financière du Gouvernement fédéral en vue de subvenir aux besoins des personnes nécessiteuses dans des établissements de soins spéciaux s'est accrue.

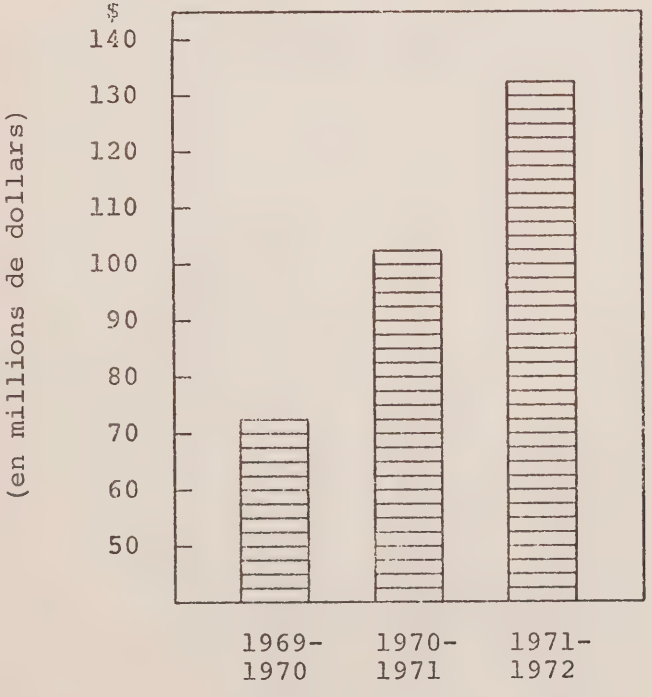


DIAGRAMME 3: COÛTS POUR LES ÉTABLISSEMENTS DE SOINS SPÉCIAUX - CONTRIBUTION FÉDÉRALE

Assistance générale

L'accroissement inhabituel du nombre de cas et des frais d'assistance générale, qui a débuté en mai 1970, s'est poursuiv régulièrement et indépendamment des fluctuations saisonnières normales jusqu'en août 1971, date à laquelle le nombre de bénéficiaires en Colombie-Britannique a brusquement baissé, abaissement suivi, quelque temps plus tard, d'une évolution semblabl en Ontario. Cette croissance freinée du nombre de cas a été quelque peu compensée, du point de vue du coût, par les augmentations des taux d'assistance. La participation accrue du Gouvernement fédéral aux frais d'assistance pour l'année a été de 90 millions de dollars, augmentation de 21% par rapport à l'année 1970-1971 alors que les frais d'assistance excédaient de 35% ceux de l'année précédente.

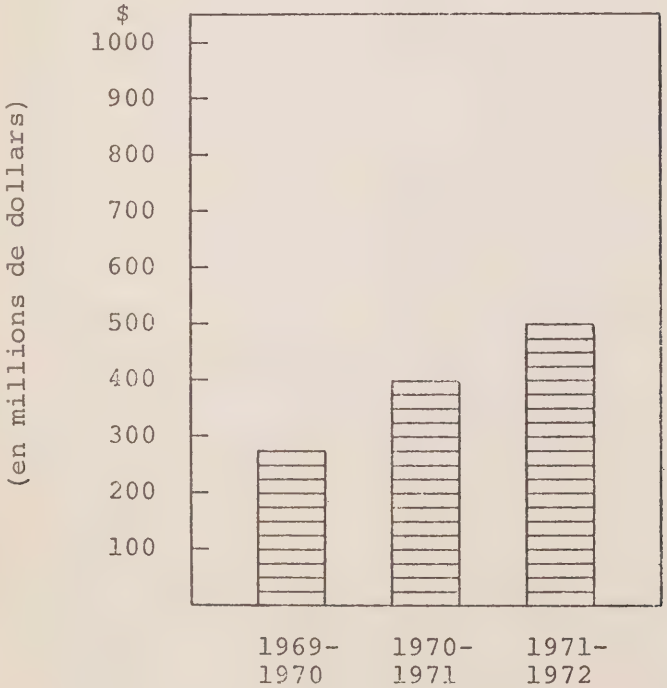


DIAGRAMME 2: COÛTS DE L'ASSISTANCE GÉNÉRALE
- CONTRIBUTION FÉDÉRALE

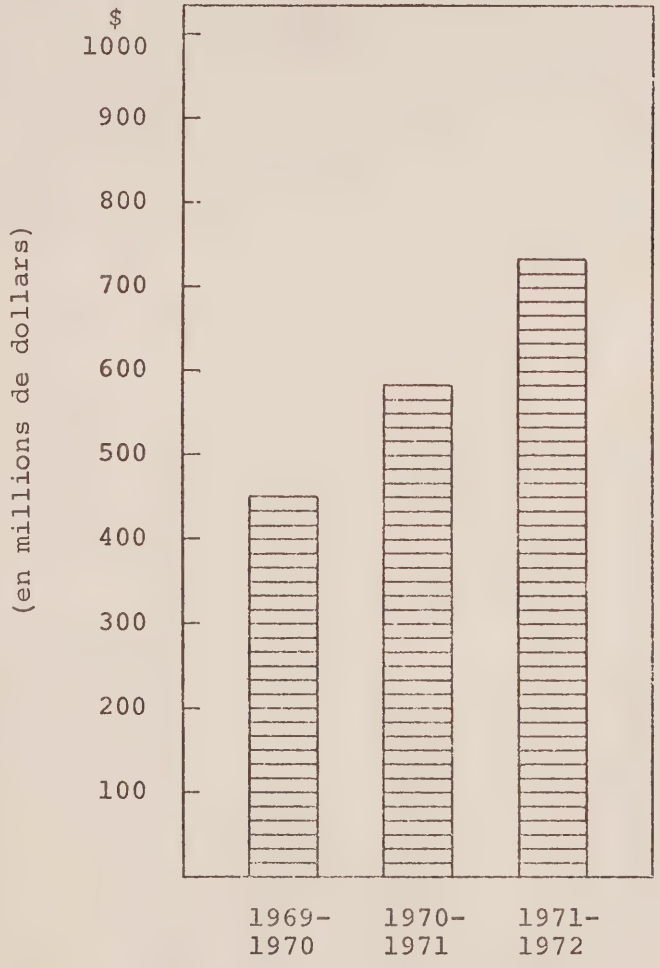
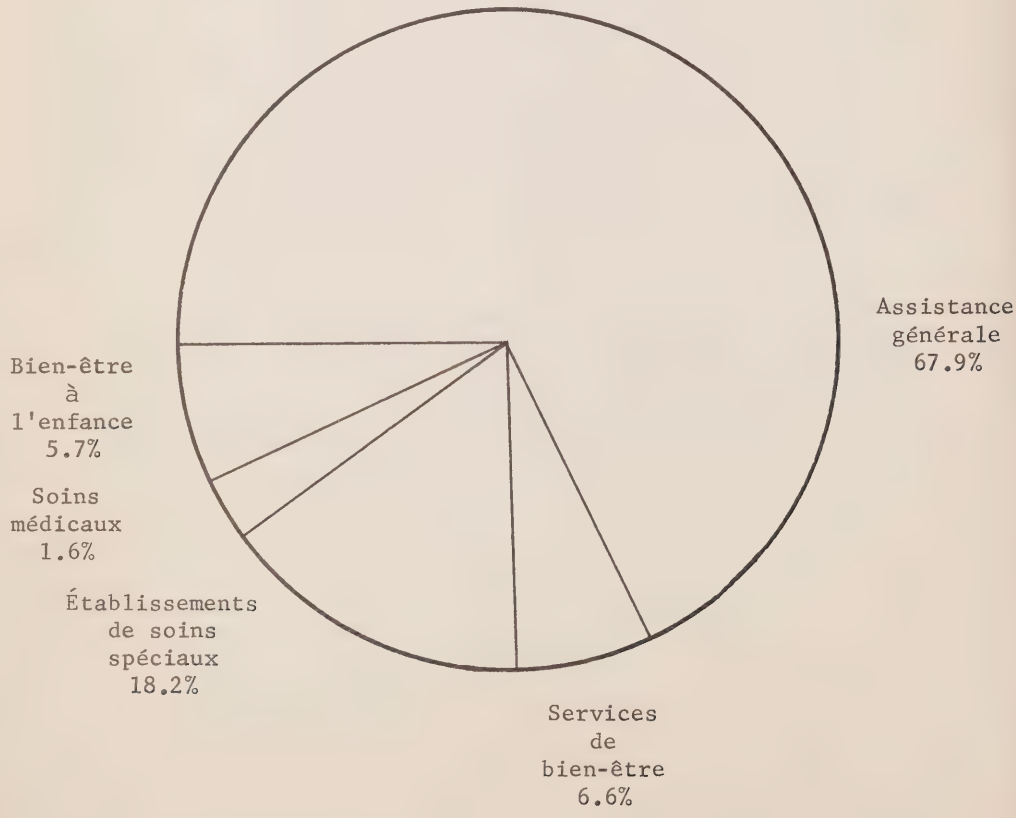


DIAGRAMME 1: PAIEMENTS FÉDÉRAUX EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA

Paiements du Gouvernement fédéral aux provinces

Les paiements faits par le Gouvernement fédéral aux provinces, en 1971-1972, ont marqué une hausse importante par rapport aux paiements faits en 1970-1971. (Voir les Tableaux 1 et 2 aux pages 18 et 19.) Les principaux domaines d'accroissement ont été l'assistance générale, les soins en établissement de bien-être et les services de bien-être social. Les coûts du bien-être à l'enfance ont été relativement stables alors que les coûts des soins médicaux aux personnes nécessiteuses ont décliné.

ALLOCATIONS DES DÉPENSES PARTAGÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
ANNÉE FINANCIÈRE 1971-1972



NOMBRE DE CAS

ET TABLEAUX FINANCIERS

Comme on l'a indiqué précédemment, l'un des principaux objectifs du Régime d'assistance publique du Canada est d'aider les provinces à créer et à améliorer les régimes de bien-être social dont ils sont chargés. La consultation entre les niveaux supérieurs de gouvernement joue un rôle important dans ce processus.

Les ministres fédéraux et provinciaux du bien-être se sont réunis en juin 1971. La Conférence a été convoquée à la demande des premiers ministres, à la Conférence constitutionnelle, afin que les ministres du bien-être puissent rendre compte de leurs discussions ultérieures sur les principales questions de sécurité de revenu à la Conférence des premiers ministres qui devait se tenir plus tard au cours de ce mois. Les principaux points discutés furent les modifications proposées à la Loi sur les allocations familiales, au Régime de pension du Canada et au Régime d'assistance publique du Canada.

Les représentants des services provinciaux du bien-être de l'enfance ont tenu leur réunion annuelle, le conseiller du Régime d'assistance publique du Canada sur le bien-être de l'enfance agissant à titre de secrétaire. Des sujets d'intérêt commun en matière de bien-être de l'enfance, tels que l'intégration des services de bien-être de l'enfance et des services aux jeunes délinquants, les adoptions d'enfants sur les plans interprovinciaux et internationaux, et le problème des enfants maltraités constituaient les principaux points à l'ordre du jour. Les modifications à la législation, à la ligne de conduite et aux procédures au sein des provinces, de même que des renseignements sur les nouveaux régimes ont été présentés et révisés.

Outre ces réunions ministérielles et officielles, les discussions quotidiennes ordinaires entre les fonctionnaires fédéraux et provinciaux se sont poursuivies. Les conseillers du ministère ont visité toutes les provinces pour aider à régler les difficultés techniques et administratives et pour se tenir au courant de l'importante variété de programmes provinciaux et municipaux.

RÉUNIONS AVEC LES PROVINCES

Intégration des services sociaux aux services de santé et autres services communautaires.

On a constaté, au cours des quelques dernières années, que de nombreux services offerts par les ministères du bien-être social et de la Santé sont de même nature et ont souvent des buts et des clients communs. Par conséquent, plusieurs provinces ont décidé de réunir les services existants et de dispenser ceux-ci de lieux facilement accessibles aux intéressés.

En conséquence, deux genres de changements se sont produits. On a augmenté le nombre de centres qui offrent des services intégrés directement aux clients, et ces centres étaient souvent situés dans des centres commerciaux ou près de ceux-ci. Afin de faciliter ces changements, des nouveaux ministères provinciaux ont été établis. Ils combinaient et intégraient les diverses spécialités de service professionnel. Une législation à cet égard a été adoptée au Québec et en Alberta au cours de l'année. Plus tôt, le Manitoba et le Nouveau-Brunswick ont adopté des mesures semblables. Cette tendance indique bien les tentatives faites pour résoudre les problèmes qui se posent lorsque plusieurs ministères d'un gouvernement offrent des services connexes, mais non coordonnés, au même groupe de clients.

Extension des services de bien-être social

Au cours des dernières années, des individus et notamment des familles ont fait face à des difficultés nouvelles, nées des changements nombreux et divers que connaît la société moderne. Pendant l'année, on a accordé une plus grande attention à de telles difficultés, comme la désintégration de la famille, l'usage non médical des drogues, particulièrement chez les jeunes, et la tenue d'un budget.

Le résultat fut une augmentation, dans les accords fédéraux-provinciaux, de la liste des organismes qui dispensent des conseils et particulièrement des services de conseillers en matière de budget: Un nombre croissant d'établissements de garderie et d'autres organismes dispensant des services à la communauté, destinés à aider les familles à faire face aux conditions et pressions actuelles, figurent également à la liste des accords sur le partage des coûts.

On peut constater l'accroissement du coût de ces services au diagramme 6 à la page 16.

MODIFICATIONS IMPORTANTES APPORTÉES AUX PROGRAMMES PROVINCIAUX

On s'attend que cette modification facilitera une planification et un contrôle plus efficace de la part des administrations municipales, des gouvernements fédéral et provinciaux en permettant aux ministères intéressés de reconnaître les nouveaux besoins rapidement, d'analyser les solutions de rechange et de prendre des décisions relatives aux lignes de conduite et aux régimes dans les plus brefs délais.

Paiements anticipés.

Au cours des années précédentes, les gouvernements des provinces et du territoire du Yukon ont totalisé leurs frais d'assistance sociale et de services de bien-être et ont soumis une réclamation mensuelle au Gouvernement fédéral. En vertu de la modification DORS 71-96 aux Règlements, on peut dresser une prévision des frais provinciaux et le Gouvernement fédéral peut faire un versement anticipé, réduisant ainsi l'intérêt imputé aux provinces en vertu du système précédent.

Réorganisation administrative

Une réorganisation de la Direction du Régime d'assistance publique du Canada et de la Direction générale de l'aide et des services sociaux a été entreprise au cours de cette année financière. On a établi une distinction plus nette entre le groupe des conseillers qui traitent de la gestion de l'aide financière et ceux dont la tâche se rapporte principalement aux domaines des services de bien-être.

Le personnel a été augmenté pour permettre au Ministère de répondre plus efficacement aux demandes de consultations de la part des provinces, des municipalités, des oeuvres bénévoles et des citoyens intéressés, dans tout le Canada, relativement à diverses questions sur les lignes de conduite et sur l'administration.

De plus, une Division de la planification et de l'évaluation a été établie pour coordonner les efforts de planification à la Direction générale et afin de s'assurer que le Régime d'assistance publique du Canada réagisse de manière appropriée après les modifications apportées aux régimes de bien-être social provinciaux et municipaux.

Une Division de l'information sur le bien-être social a été créée au sein de la Direction générale pour mettre en oeuvre les recommandations faites dans un récent rapport fédéral provincial sur les frais des régimes de bien-être social. Son but est d'améliorer la cueillette de données concernant les régimes de bien-être au Canada qui pourraient être utilisés par tous ceux qui établissent, planifient et administrent des régimes de bien-être social.

- traitements et frais de déplacement du personnel,

- allocations payées aux participants,

- location ou achat d'équipement ou dépréciation de celui-ci; location de terrains ou de locaux,

- matériel employé à la réalisation des projets et autres coûts d'exploitation.

On s'attend que les provinces élaboreront d'autres projets de cette nature au cours de la prochaine année financière. De cette façon, le Gouvernement fédéral et les gouvernements provinciaux pourront aider de façon plus concrète les personnes en marge de la société technologique actuelle.

Partage des plus-payés

Les plus-payés résultent principalement de la négligence du client ou du défaut de comprendre ce qu'on exige de lui ou à cause d'une erreur administrative de la part des fonctionnaires du bien-être social. Les cas de fraudes sont très rares. Lorsqu'on découvrait ces plus-payés, le Gouvernement fédéral ne pouvait participer au paiement de la somme versée par erreur et l'on demandait aux provinces de retourner la part du Gouvernement fédéral.

En vertu de la modification D.O.R.S. 71-96 aux règlements, lorsque les provinces ont présenté un plan acceptable de prévention et de récupération des plus-payés, le Canada peut prendre à sa charge une partie des plus-payés non recouvrés (c'est-à-dire qu'il n'y a pas lieu de rembourser la part du Gouvernement fédéral).

Le Gouvernement fédéral a approuvé ces régimes au Yukon et dans toutes les provinces, sauf en Ontario. Un délai a été fixé pour la révision de ces régimes afin de déterminer leur efficacité.

Partage des frais d'ordinateur

En vertu de la modification DORS 71-96 aux règlements relatifs aux services de bien-être social, la participation du Gouvernement fédéral aux frais de services d'ordinateur, assurés à un ministère provincial du bien-être social par un organisme central du gouvernement, a été approuvée.

Antérieurement, les frais de services d'ordinateur pour les services de bien-être social étaient partageables seulement s'ils étaient assurés au sein du ministère offrant le service de bien-être. Si le ministère du Bien-être social faisait usage des services centraux d'ordinateur, par exemple, les frais n'en étaient pas, jusque-là, partageables.

des provinces dans leurs efforts constants pour améliorer leurs régimes d'assistance sociale et leurs services de bien-être. Des modifications ont été proposées pour permettre une plus grande participation financière du Gouvernement fédéral aux services de garderie et aux projets d'adaptation au travail.

De plus, une réorganisation administrative de la Direction du Régime d'assistance publique du Canada a été entreprise au cours de l'année afin d'améliorer les services financiers et consultatifs offerts aux provinces en vertu du Régime.

Garderies

Au cours de l'année, le Gouvernement fédéral s'est intéressé davantage à l'expansion des services communautaires destinés à aider la famille comme cellule de base de la société. Les garderies sont considérées comme un élément important de ces services.

Le besoin aigu de services de garderie au Canada a été mis en évidence par la Commission royale d'enquête sur la situation de la femme. La Conférence canadienne sur la garde de jour, en 1971, a également recommandé que le Gouvernement fédéral accroisse sa participation à la dispensation de services de garderie. Des recommandations ont été faites par la Fédération des clubs de femmes de carrières libérales et commerciales.

Puisque la famille à faible revenu est celle qui risque le plus l'éclatement dans la société moderne, le Gouvernement a concentré son attention sur celle-ci par l'entremise du RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA.

Une proposition a donc été préparée selon laquelle il est suggéré que le partage des frais des services de garderie soit réalisé sur des bases élargies et que soit créé un Centre national de renseignements sur les services de garderie. Le Cabinet a étudié la question vers la fin de la dernière année financière et l'a approuvée au début de l'année financière 1972-1973.

Projets d'adaptation au travail

À la fin de l'année financière, la participation accrue du Gouvernement fédéral au financement des projets d'adaptation au travail a été approuvée par le Gouvernement pour encourager un usage plus grand de cette mesure de réadaptation. Les règlements seront modifiés au cours de la prochaine année financière pour tenir compte des changements apportés. Le Gouvernement fédéral pourra partager les coûts suivants:

Au cours de l'année financière 1971-1972, le RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA s'est révélé un instrument dynamique par lequel les provinces ont pu continuer à améliorer leurs régimes d'assistance sociale ainsi qu'à développer et à étendre les services de bien-être social. Le Régime permet au Gouvernement fédéral de contribuer 50% des dépenses partageables effectuées par les provinces ou les municipalités pour l'assistance publique et les services au Bien-être social.

Ce dynamisme a toujours été à la base du Régime, depuis sa création, en 1966, pour répondre aux demandes formulées par les provinces pour une participation accrue du Gouvernement fédéral aux régimes d'assistance générale. On croyait alors que les régimes spéciaux existant donnaient une définition trop limitative du droit aux prestations, du revenu permissible et du montant des allocations, et qu'il ne tenait pas compte des besoins changeants d'une personne et de sa famille.

Les régimes spéciaux étaient les suivants: la Loi sur la Sécurité de la vieillesse (1951), la Loi sur les invalides (1954), la Loi sur les aveugles (1957), et un quatrième, sur l'assistance chômage, sanctionnée en 1956, la Loi offrait une approche plus globale. Ce régime différait des trois autres parce qu'il ne précisait pas les conditions d'admissibilité (autres que le chômage et le besoin) ni ne plafonnait les allocations devant être partagées. Le Gouvernement fédéral assumait une part des coûts de ces régimes mis en oeuvre par les provinces.

La Loi sur le RÉGIME D'ASSISTANCE PUBLIQUE du Canada a été élaborée en consultation avec les provinces et est devenue l'une des mesures les plus importantes du Canada dans la lutte contre la pauvreté grâce à ces trois principaux objectifs:

- aider les provinces à élaborer des régimes globaux pour assister toutes les personnes dans le besoin, quelle que soit la raison;

- encourager la prestation de niveaux appropriés d'assistance qui permettrait aux bénéficiaires de maintenir un niveau de vie convenable;

- appuyer le développement de services de bien-être qui pourraient encourager et aider des bénéficiaires à subvenir à leurs besoins.

Plusieurs modifications aux règlements sur le RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA ont été approuvées au cours de l'année financière 1971-1972 pour permettre au Gouvernement fédéral de mieux répondre aux besoins toujours croissants

INTRODUCTION

Les Rapports annuels antérieurs sur l'application du Régime d'assistance publique du Canada comprenaient une revue historique et une explication des principes fondamentaux de la législation. Ces renseignements sont maintenant le sujet d'une brochure et ne figurent donc pas dans le présent rapport annuel.

L'honorable Marc Lalonde, C.P., Député
Ministre de la Santé nationale et du Bien-être social
Ottawa

Monsieur le Ministre,

Conformément aux dispositions de l'article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1972.

Je vous prie d'agréer, Monsieur le Ministre, l'assurance de mes sentiments dévoués.

Le Sous-ministre du Bien-être social,
A. W. Johnson

Son Excellence l'honorable Roland Michener, C.P., C.R., Gouverneur général et Commandant en chef du Canada.

QU'IL PLAISE À VOTRE EXCELLENCE,

J'ai l'honneur de présenter à Votre Excellence le Rapport annuel sur l'application du Régime d'assistance publique du Canada pour l'année financière terminée le 31 mars 1972.

Je vous prie d'agréer, Monsieur le Gouverneur général, l'assurance de mon profond respect.

Le Ministre de la Santé nationale
et du Bien-être social,
Marc Lalonde

GIME D'ASSISTANCE
LIQUE DU CANADA

71-72

RAPPORT ANNUEL

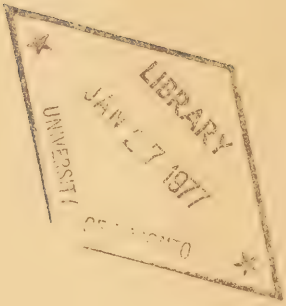


Santé et
Bien-être social
Canada

Health
and Welfare
Canada

57

Government
Publications



ADA ASSISTANCE PLAN 72-73 ANNUAL REPORT

Health and Welfare Canada

Santé et Bien-être social Canada

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Canada Assistance Plan 1972/73 Annual Report

His Excellency the Right Honourable Jules Léger, C.C., C.C.M., C.D.
Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to Your Excellency the Annual Report on the administration of the Canada Assistance Plan for the fiscal year ended March 31, 1973.

Respectfully submitted,

The Honourable Marc Lalonde
Minister of National Health
and Welfare

The Honourable Marc Lalonde
Minister of National Health and Welfare

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1973.

Respectfully submitted,

A.W. Johnson
Deputy Minister of National Welfare

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I - INTRODUCTION

Since its inception in 1966, The Canada Assistance Plan has been the federal government's primary method of supporting established provincial programs of assistance and welfare services, and of encouraging their further development and extension. Through agreements under the Plan, the federal government pays 50 percent of shareable welfare services costs and public assistance costs incurred by the provinces and their municipalities.

Prior to 1966, Canada's share of the provinces' welfare expenditures was provided under a variety of programs administered by the provinces. The Federal acts under which costs were shared were the Old Age Assistance Act (1951), the Blind Persons Act (1951) and the Disabled Persons Act (1954). It became increasingly clear, however, that these programs were too restrictive and inflexible in their eligibility criteria and rates of payment, and incapable of providing adequately for the needs of different individuals in differing situations. The Unemployment Assistance Act was introduced in 1956, to permit sharing in the costs of assistance to adults on a needs test basis, without limiting the amount of such assistance. The main weakness of this Act was the exclusion of costs related to the care and maintenance of children in the custody of provincial child welfare authorities.

As a result of discussions between the provincial and federal governments, the Canada Assistance Plan was inaugurated. Its major goals are "the provision of adequate assistance to and in respect of persons in need" and "the prevention and removal of the causes of poverty and dependence on public assistance".

II - ACTIVITIES DURING 1972 - 73

a) Federal-Provincial Agreements

During the 1972-73 fiscal year an agreement was signed, under Part I (General Assistance and Welfare Services) of the Canada Assistance Plan, with the government of the Northwest Territories. All provinces and both territories are now included under the Plan.

b) Amendments to the Regulations

Several changes in the cost sharing provisions of the Canada Assistance Plan, alluded to in the report for 1971-72, were finalized and became operative in 1972-73.

In November, 1972, the Canada Assistance Plan regulations were amended to broaden the base for federal cost sharing in work activity projects. These amendments permit the federal government to share in the costs of:

- salaries and travelling expenses of staff;
- allowances paid to participants;
- rental or purchase of equipment or depreciation on this equipment; rental of land or premises;
- materials used in carrying out the projects, and other operational costs.

The regulations were also amended to permit the federal government to share in certain additional costs of day care services, such as the rental of equipment or premises, the purchase of equipment, the cost of materials and other operational costs.

A further amendment extended cost sharing in computer services beyond salaries, to include the operating costs of computer systems. To justify the expected increase in costs claimed under this provision, the provinces will be expected to provide more comprehensive program data to the federal government.

c) Administrative Reorganization

Some administrative reorganization of the Canada Assistance Plan Directorate within the Social Allowances and Services Branch took place during the year. The income support and welfare services functions were divided between two divisions. The Income Support Division became responsible for policy formulation, consultation services, and program decisions in the field of public assistance administration, including institutional care. The Welfare Services Division was assigned responsibility for policy, consultation and decisions in the areas of child welfare, day care services, and other welfare services provided to persons in need, or to persons likely to become in need if these services were not provided.

The appointment of a day care consultant and the establishment of the Day Care Information Centre resulted in a significant increase in activity in this field. During 1972-73 the Day Care Information Centre began production of the quarterly "Day Care Newsletter", and produced the following publications: Canadian Day Care Survey, Day Care for Children and the Day Care Services Bibliographies.

During 1972-73, final administrative arrangements were made for the transfer of responsibility for the Vocational Rehabilitation of Disabled Persons Act from the Department of Manpower and Immigration to the Social Allowances and Services Branch. The ultimate aim is to establish a single comprehensive approach to the development of rehabilitation services in Canada.

d) Federal-Provincial Consultation

A federal-provincial conference on work activity projects was held in Ottawa from May 30 to June 1, 1972. The main objectives of this conference were:

- To review the concept of the work activity project;
- To provide an opportunity to share experiences;

- To develop more effective ways of achieving the objectives of this program;
- To review the basis for cost sharing under Part III of the Canada Assistance Plan.

The conference format combined the presentation of papers by conference participants with group discussions. The topics covered included: The Work Activity Concept; The Planning Process; Selection and Recruitment Procedures; the Project Method; the Role of Canada Manpower Services; the Saskatchewan New Start Life Skills Course; and The Evaluation Process. Discussion also covered possible amendments to the existing CAP regulations, the new method of submitting work activity projects, and the criteria used to assess these projects.

The annual meeting of the representatives of provincial and territorial child welfare departments was held in June. The Canada Assistance Plan Directorate's child welfare consultant acted as secretary. The group discussed such subjects as international adoption, the battered child, inter-provincial foster home placements, a proposed national survey of child welfare legislation, and Social Allowances and Services Branch programs related to child welfare, including family planning and divorce reconciliation.

Apart from such formal meetings, the normal day-to-day interchange between officials of the provinces and the Canada Assistance Plan continued. Frequent communication with provincial officials centred on matters relating to the development of improved social assistance programs and the use of Canada Assistance Plan cost-sharing provisions. These discussions also enabled CAP consultants to keep abreast of developments at the municipal and provincial levels.

Final financial claims for the early years of the Plan were settled with several provinces. By the end of the year, final audited costs had been agreed to with six provinces for three fiscal years, and with one province for five fiscal years.

III - TABLES AND CHARTS

TABLE 1

FEDERAL PAYMENTS TO THE PROVINCES
UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1972-1973

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Projects	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	20,012	2,687	821	1,254	1,242	-	26,016
Prince Edward Island	1,879	1,916	213	50	340	-	4,398
Nova Scotia	13,843	4,925	1,380	304	1,743	-	22,195
New Brunswick	17,378	3,029	859	985	583	109	22,943
Quebec*	183,690	77,114	13,351	-	19,000	-	293,155
Ontario	140,234	34,091	16,969	1,289	17,894	14	210,491
Manitoba	22,834	6,008	2,110	1,565	3,338	348	36,203
Saskatchewan	20,101	3,597	1,327	1,668	2,348	63	29,104
Alberta	40,168	3,211	3,751	569	5,040	365	53,104
British Columbia	53,282	4,840	3,849	3,049	4,719	182	69,921
Yukon Territory	182	220	85	56	157	-	700
TOTAL	513,603	141,638	44,715	10,789	56,404	1,081	768,230

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

TABLE 2

FEDERAL PAYMENTS TO THE PROVINCES
UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1971-1972

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Projects	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	20,545	2,135	845	1,220	813	-	25,558
Prince Edward Island	1,702	1,897	184	29	229	-	4,041
Nova Scotia	13,727	3,914	1,630	256	2,330	-	21,857
New Brunswick	14,494	2,139	1,118	851	1,627	-	20,229
Quebec*	168,270	74,570	13,350	1,000	14,000	315	271,505
Ontario	148,199	31,478	13,404	1,222	16,725	7	211,035
Manitoba	23,640	5,518	2,213	1,868	3,065	-	36,304
Saskatchewan	18,395	3,025	1,103	1,593	1,168	22	25,306
Alberta	32,990	2,377	3,364	443	3,488	146	42,808
British Columbia	51,546	5,533	3,982	3,387	4,018	109	68,575
Yukon Territory	66	-	42	-	51	-	159
TOTAL	493,574	132,586	41,235	11,869	47,514	599	727,377

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

TABLE 3

NUMBER OF PERSONS BEING ASSISTED UNDER THE
CANADA ASSISTANCE PLAN AS AT MARCH 31, 1973

Province	Child Care	Assistance Recipients*	Adults in Institutions	Total
Newfoundland	2,016	70,912	1,357	74,285
Prince Edward Island	412	7,238	983	8,633
Nova Scotia	3,824	52,864	1,733	58,421
New Brunswick	2,866	58,575	2,023	63,464
Quebec	36,036	406,452	10,451	452,939
Ontario	19,761	307,880	23,214	350,855
Manitoba	4,108	70,427	4,921	79,456
Saskatchewan	3,151	56,728	6,735	66,614
Alberta	6,091	85,456	2,736	94,283
British Columbia	9,913	103,989	5,873	119,775
Yukon Territory	307	892	61	1,260
Canada	88,485	1,221,413	60,087	1,369,985

* Including dependants

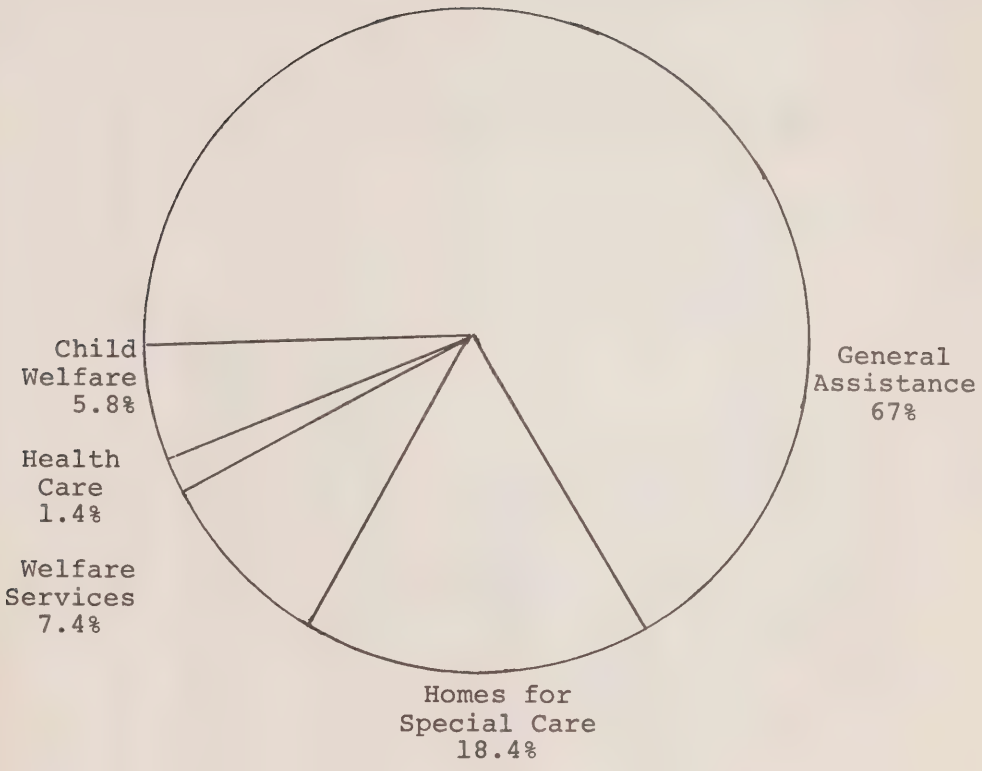


CHART 1 - ALLOCATION OF EXPENDITURES SHARED
UNDER THE CANADA ASSISTANCE PLAN
FISCAL YEAR 1972-73

Federal Payments to Provinces

The rate of increase in federal payments was less in 1972-73, as compared with the average rate over the three previous fiscal years. The main areas of growth were in welfare services and work activity

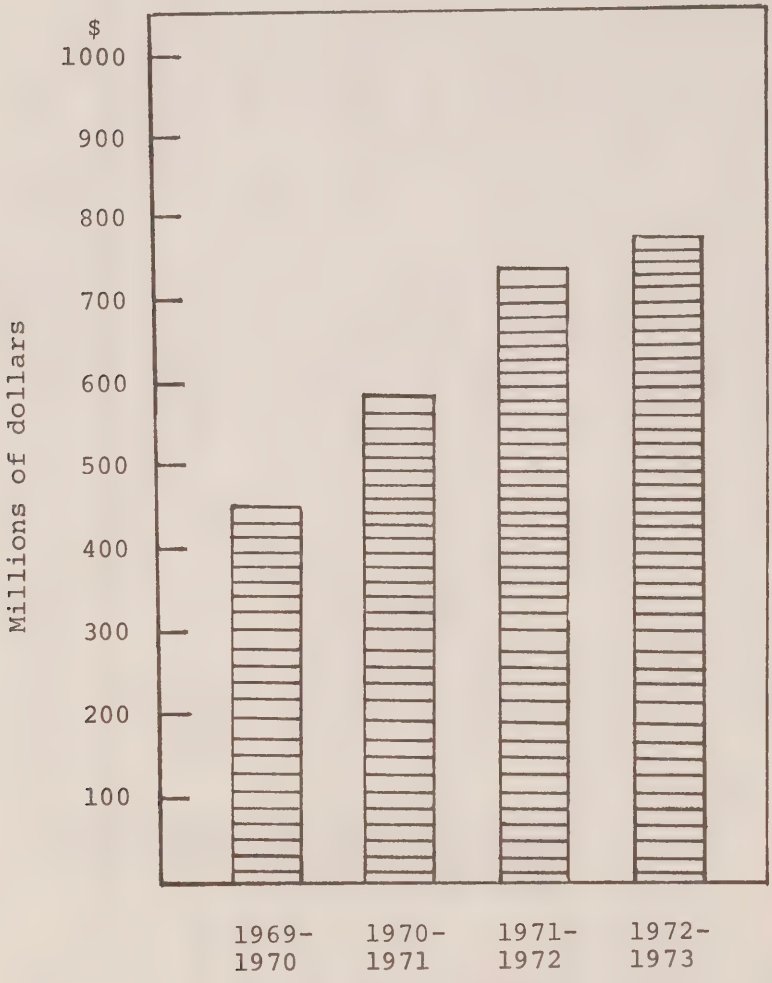


CHART 2 - TOTAL FEDERAL PAYMENTS UNDER THE CANADA ASSISTANCE PLAN

General Assistance

There was some reduction in the case-load of recipients, especially in Quebec, and a relatively slight increase ($20 million, compared with $90 million in 1971-72) in the federal share of assistance costs.

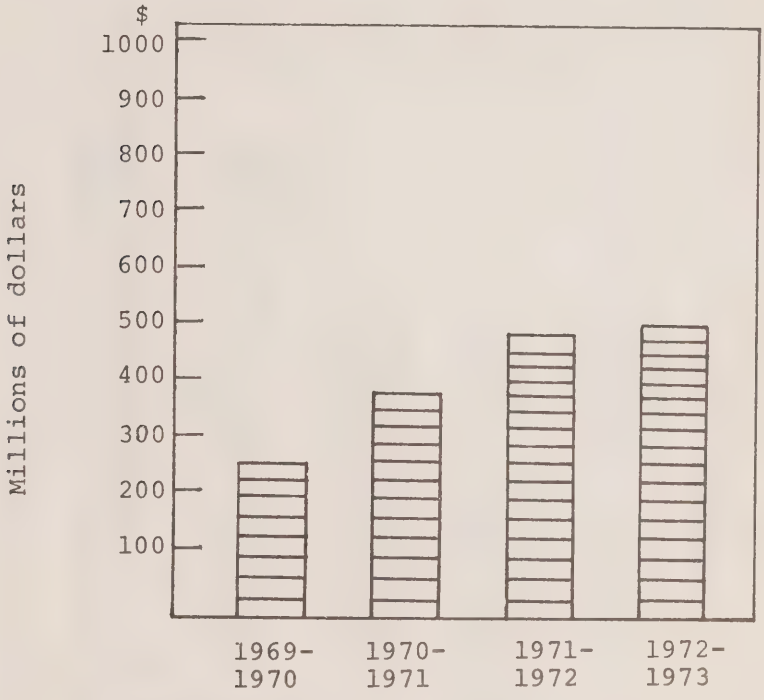


CHART 3 - GENERAL ASSISTANCE
- FEDERAL SHARE OF COSTS

Homes for Special Care

The increase in costs in 1972-73 was less than the increases in the previous two years. This is due in large part to a loss of federal sharing in certain nursing care programs which have been changed to a universal basis in some provinces. (Universal programs are not shareable under the terms of Canada Assistance Plan legislation).

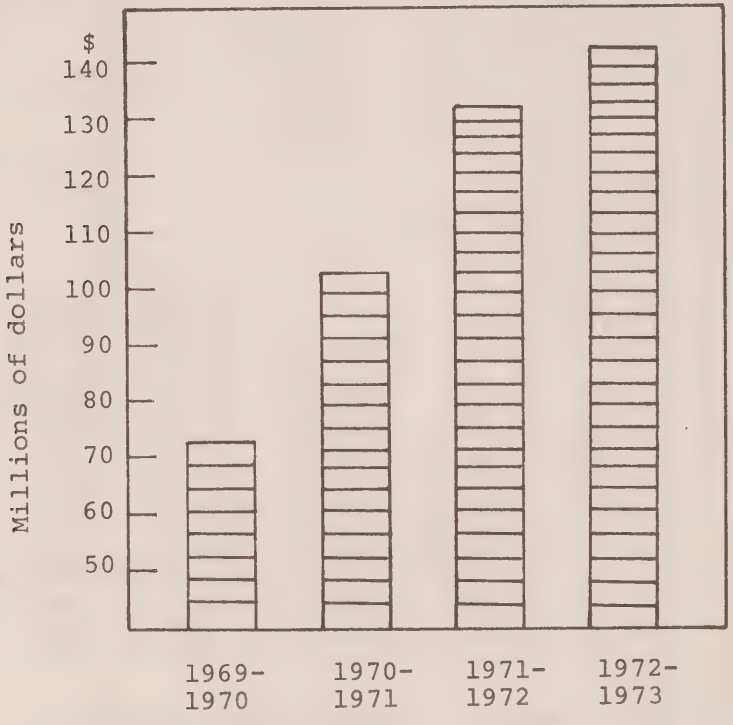


CHART 4 - HOMES FOR SPECIAL CARE
- FEDERAL SHARE OF COSTS

Child Welfare

As in the previous year, costs in this area increased marginally, reflecting the general increase in the cost of salaries and services during the fiscal year.

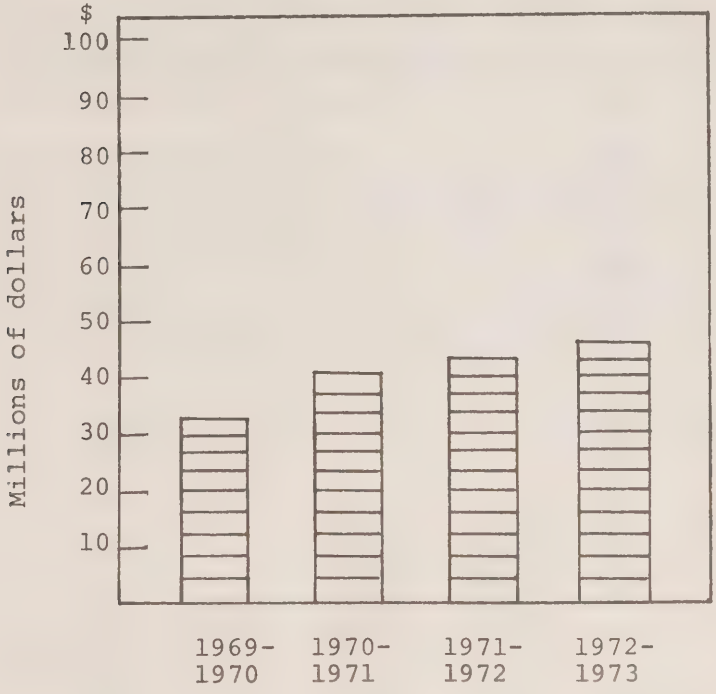


CHART 5 - CHILD WELFARE - FEDERAL SHARE OF COSTS

Health Care

Costs in this area continue to decrease. One factor in this trend is the introduction by several provinces of programs providing certain health care services free of charge to all persons 65 and over. Such costs are not shareable under the Canada Assistance Plan.

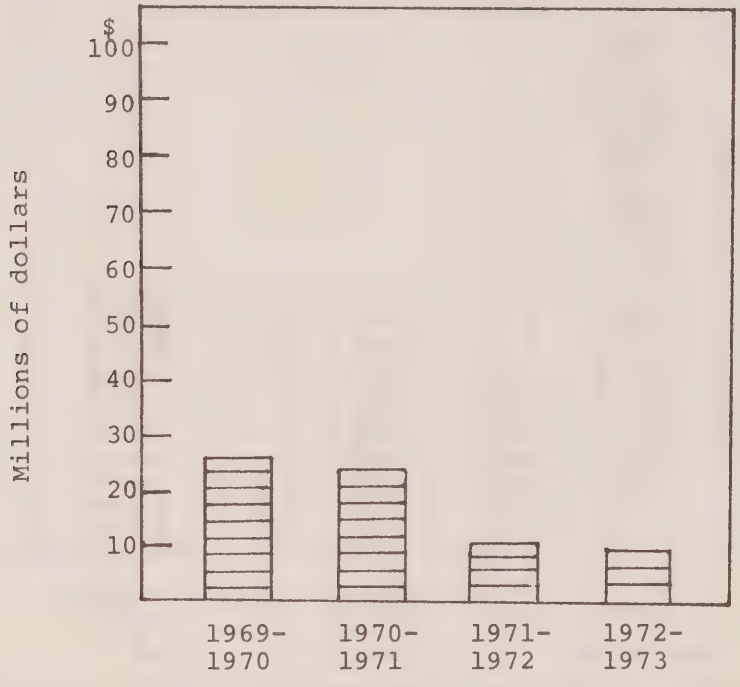


CHART 6 - HEALTH CARE FOR NEEDY PERSONS
- FEDERAL SHARE OF COSTS

Welfare Services

Welfare services are described as services that have as their object the lessening, removal or prevention of the causes and effects of poverty, child neglect or dependence upon public assistance. More specifically, they include rehabilitation services, casework, counselling and assessment services, homemaker and day care services, and community development. Administrative, secretarial and clerical functions associated with the provision of welfare services and the administration of assistance are covered, as are staff training, consultation, research and evaluation associated with welfare programs.

Welfare services costs have risen rapidly as services such as day care, homemakers, and family and credit counselling, have expanded significantly to meet public need. Additional staff have been required by the provinces to meet the needs of the increased number of persons requiring public assistance, and to provide welfare services. Rising salary and benefit costs for persons employed in the welfare service field also added to the increase in costs.

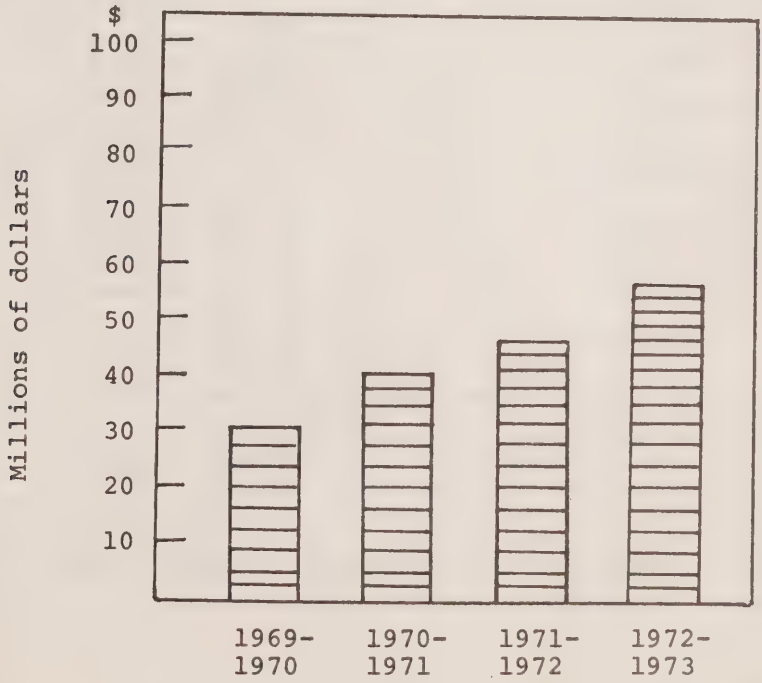


CHART 7 - WELFARE SERVICES - FEDERAL SHARE OF COSTS

Work Activity

Since its inception in 1968 the work activity program has steadily increased its involvement in projects designed to improve the employability of persons who have unusual difficulty in finding or retaining jobs. The fiscal year 1972-73 saw a dramatic increase in the size of the program, which expanded to include 44 projects involving 1,787 persons in 7 provinces. With continued and increased federal-provincial consultation and cooperation, highlighted by such events as the Work Activity Conference in May, 1972, a further increase in the program's size is expected.

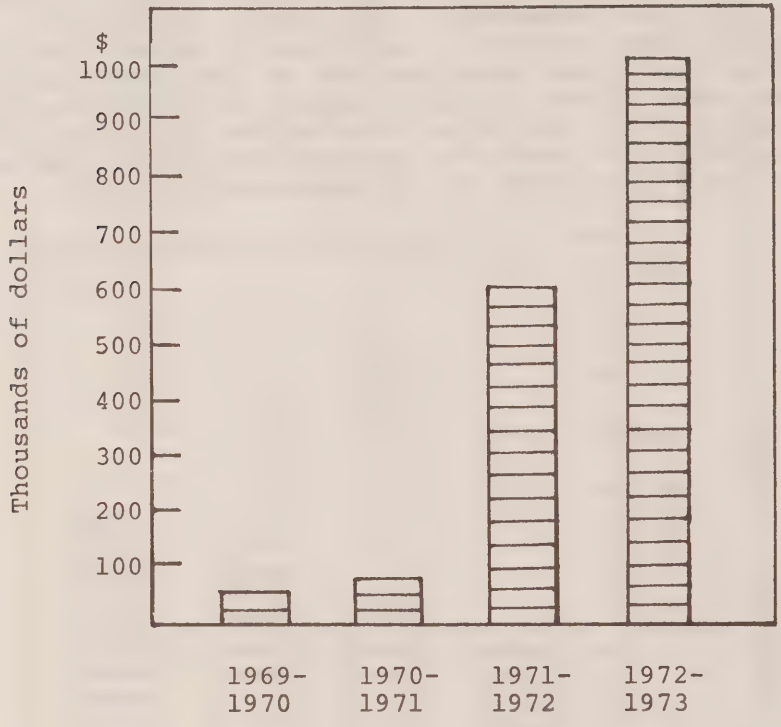


CHART 8 - WORK ACTIVITY PROJECTS - FEDERAL SHARE OF COSTS

L'Adaptation au travail

Depuis sa création en 1968, ce programme a accru sa participation à des projets destinés à améliorer les aptitudes au travail de personnes qui éprouvent des difficultés exceptionnelles à trouver et à conserver un emploi. Le programme a connu une expansion étonnante pendant l'année financière 1972-1973 puisqu'il s'est étendu à 44 projets comportant la participation de 1,787 personnes dans sept provinces. Qui plus est, grâce à une consultation et une coopération fédérales-provinciales accrues, mises en lumière par des événements tels que la Conférence sur l'adaptation au travail en mai 1972, nous nous attendons à ce que l'expansion du programme se poursuive.

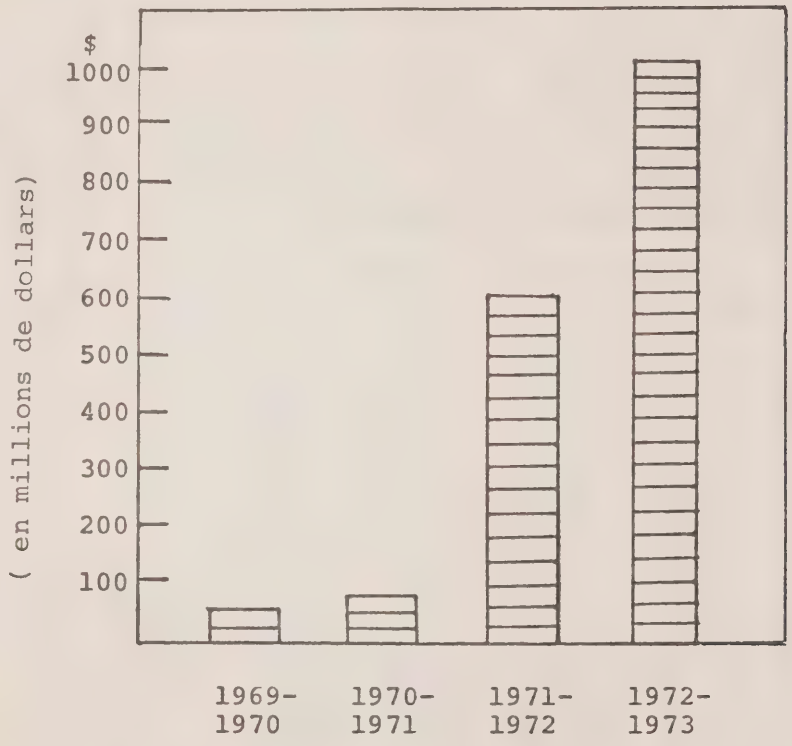


DIAGRAMME 8 - COÛTS DES PROJETS D'ADAPTATION AU TRAVAIL - CONTRIBUTION FÉDÉRALE

Services de bien-être social

Les services de bien-être social ont pour objet d'atténuer, de supprimer ou d'empêcher les causes et les effets de la pauvreté, de la négligence à l'égard des enfants ou du recours à l'assistance publique. Cette rubrique comprend tout particulièrement des services de réadaptation, services sociaux personnels, services de consultation, d'évaluation, d'auxiliaires familiales, de garderie et de développement communautaire. Sont également inclus dans ces services, les fonctions d'administration, de secrétariat et de commis aux écritures liées à la prestation de services de bien-être social et à l'administration de l'assistance sociale, de même que la formation du personnel, la consultation, la recherche et l'évaluation se rattachant aux programmes de bien-être social.

Les dépenses à ce chapitre se sont accrues rapidement, car des services comme les garderies, les conseillers familiaux et budgétaires, les services d'auxiliaires familiales, ont été sensiblement étendus pour répondre aux besoins du public. Il fallait en outre recruter du personnel supplémentaire pour servir un nombre accru d'assistés et pour assurer les services de bien-être social. La hausse des traitements et le relèvement des avantages sociaux pour le personnel des services du bien-être social, ont également concouru à l'augmentation des dépenses.

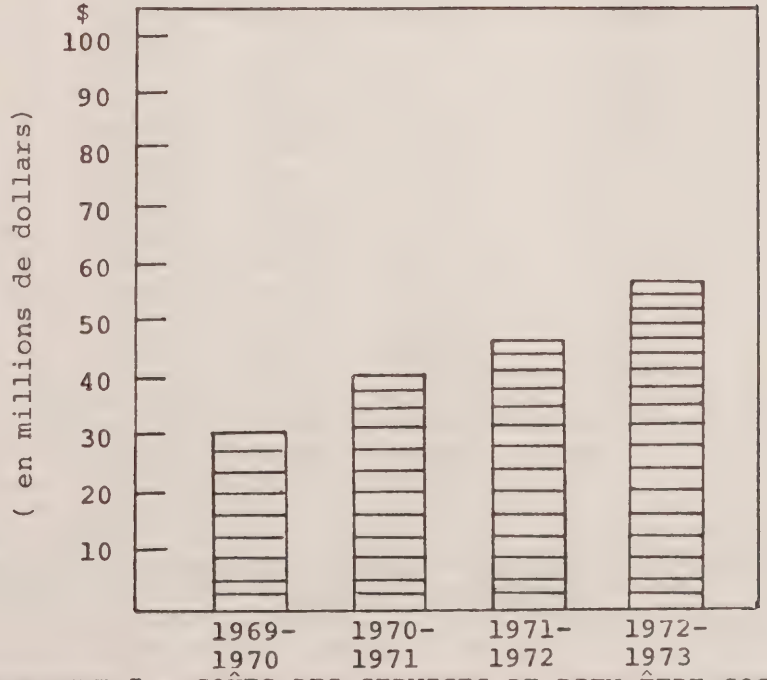


DIAGRAMME 7 - COÛTS DES SERVICES DE BIEN-ÊTRE SOCIAL - CONTRIBUTION FÉDÉRALE

Soins médicaux

Les coûts dans ce secteur ont continué de baisser. Ce phénomène est attribuable en partie au fait que plusieurs provinces ont décidé d'offrir gratuitement certains soins médicaux aux personnes âgées de 65 ans et plus. Or, ce genre de frais n'est pas partageable en vertu du Régime d'assistance publique du Canada.

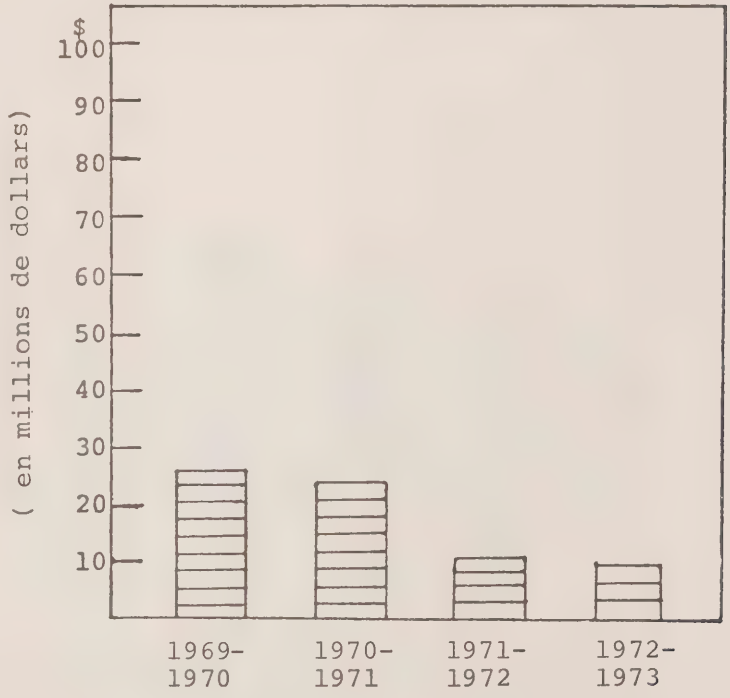


DIAGRAMME 6 - COÛTS DES SOINS MÉDICAUX POUR PERSONNES NÉCESSITEUSES - CONTRIBUTION FÉDÉRALE

Services de bien-être à l'enfance

Tout comme l'année précédente, les coûts dans ce domaine ont peu augmenté et correspondent à l'augmentation générale du coût des salaires et des services au cours de l'année financière.

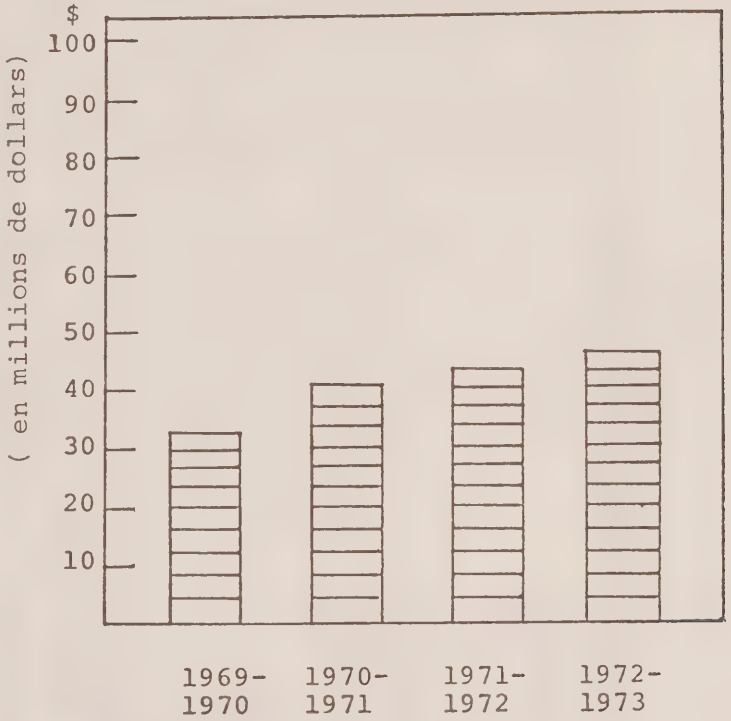


DIAGRAMME 5 - COÛTS DES SERVICES DE BIEN-ÊTRE À L'ENFANCE - CONTRIBUTION FÉDÉRALE

Foyers de soins spéciaux

Le taux de hausse des coûts pour les foyers de soins spéciaux a été moins élevé en 1972-1973 qu'au cours des deux dernières années. Une partie de ce ralentissement est due au fait que le gouvernement fédéral ne participe plus à certains programmes de soins infirmiers qui ont été établis sur une base universelle. (Les programmes universels ne sont pas partageables en vertu du Régime d'assistance publique du Canada.)

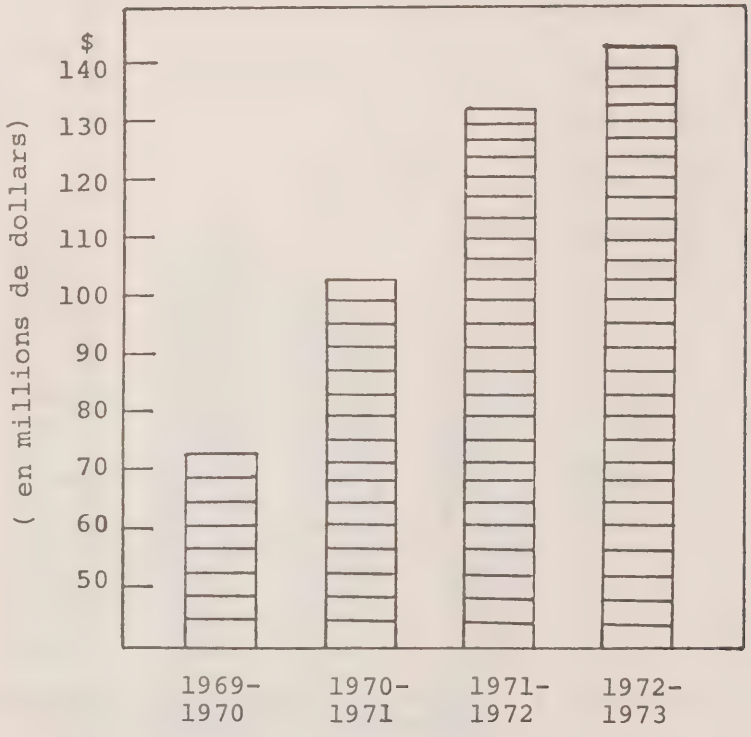


DIAGRAMME 4 - COÛTS POUR LES FOYERS DE SOINS SPÉCIAUX - CONTRIBUTION FÉDÉRALE

Assistance générale

Il y a eu une réduction du nombre de cas d'assistés, surtout au Québec, et une légère augmentation (20 millions en comparaison aux 90 millions de l'année 1971-1972) de la participation du gouvernement fédéral aux frais d'assistance.

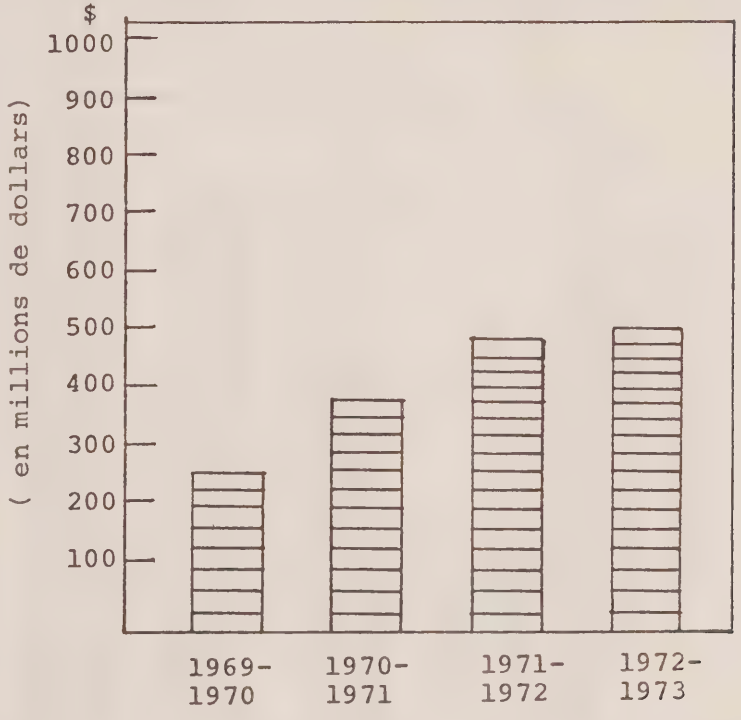


DIAGRAMME 3 - COÛTS DE L'ASSISTANCE GÉNÉRALE
- CONTRIBUTION FÉDÉRALE

Paiements du gouvernement fédéral aux provinces

Le taux de hausse des paiements effectués par le gouvernement fédéral a été moindre en 1972-1973 en comparaison avec la moyenne des trois dernières années financières. Les principaux domaines d'accroissement ont été les services de bien-être social et l'adaptation au travail.

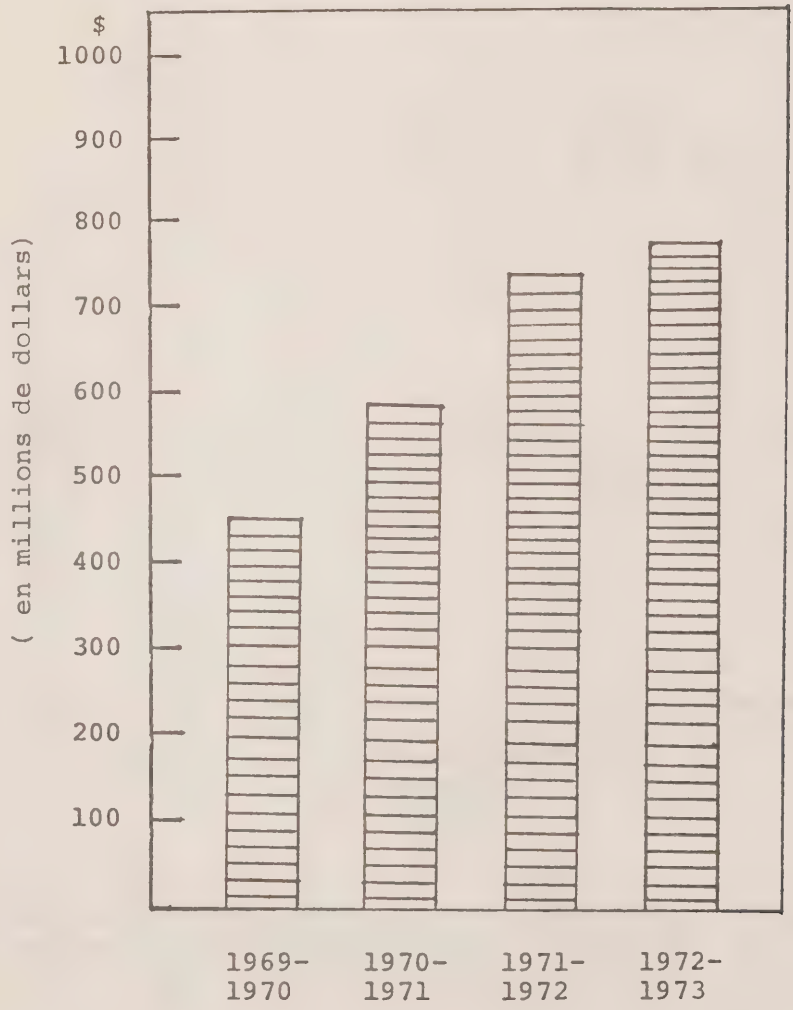


DIAGRAMME 2 - ENSEMBLE DES PAIEMENTS FÉDÉRAUX EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA

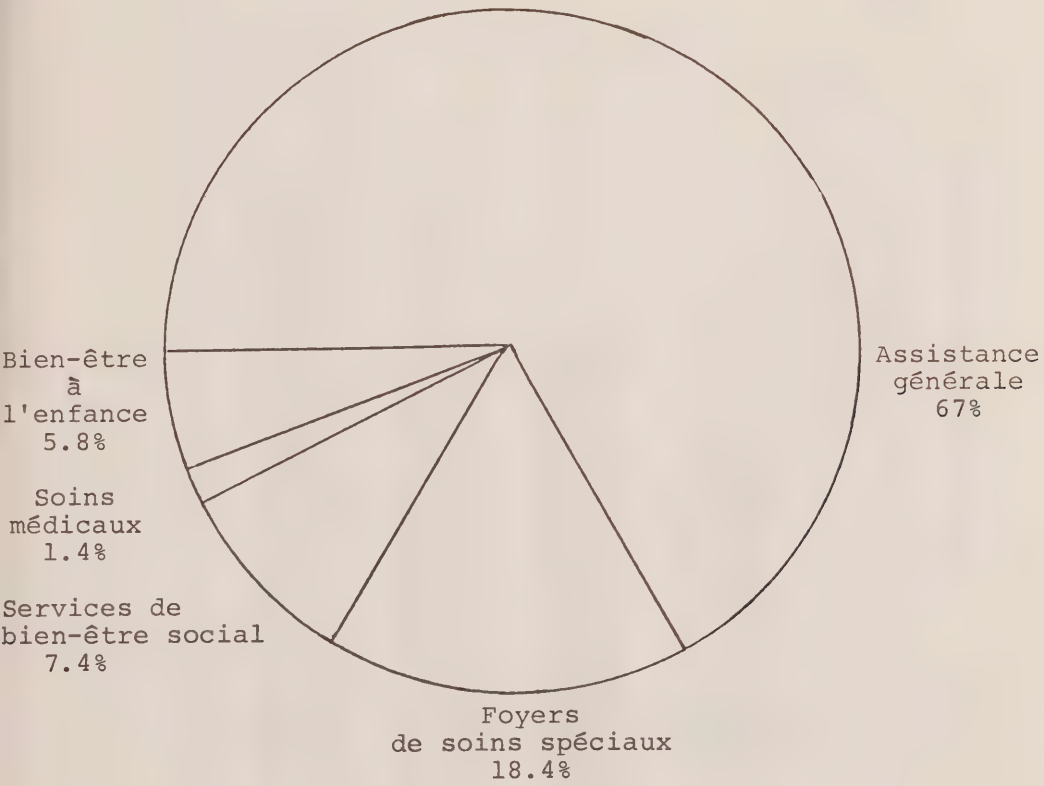


DIAGRAMME 1 - RÉPARTITION DES DÉPENSES PARTAGÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA ANNÉE FINANCIÈRE 1972-1973

TABLEAU 3

NOMBRE DE PERSONNES ASSISTÉES
RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
AU 31 MARS 1973

Province	Services à l'enfance	Assistés sociaux*	Adultes dans les foyers de soins spéciaux	Total
Terre-Neuve	2,016	70,912	1,357	74,285
Île-du-Prince-Édouard	412	7,238	983	8,633
Nouvelle-Écosse	3,824	52,864	1,733	58,421
Nouveau-Brunswick	2,866	58,575	2,023	63,464
Québec	36,036	406,452	10,451	452,939
Ontario	19,761	307,880	23,214	350,855
Manitoba	4,108	70,427	4,921	79,456
Saskatchewan	3,151	56,728	6,735	66,614
Alberta	6,091	85,456	2,736	94,283
Colombie-Britannique	9,913	103,989	5,873	119,775
Yukon	307	892	61	1,260
Canada	88,485	1,221,413	60,087	1,369,985

* Y compris personnes à charge

TABLEAU 2

PAIEMENTS FÉDÉRAUX AUX PROVINCES
EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNÉE FINANCIÈRE 1971-1972

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	20,545	2,135	845	1,220	813	-	25,558
Île-du-Prince-Édouard	1,702	1,897	184	29	229	-	4,041
Nouvelle-Écosse	13,727	3,914	1,630	256	2,330	-	21,857
Nouveau-Brunswick	14,494	2,139	1,118	851	1,627	-	20,229
Québec*	168,270	74,570	13,350	1,000	14,000	315	271,505
Ontario	148,199	31,478	13,404	1,222	16,725	7	211,035
Manitoba	23,640	5,518	2,213	1,868	3,065	-	36,304
Saskatchewan	18,395	3,025	1,103	1,593	1,168	22	25,306
Alberta	32,990	2,377	3,364	443	3,488	146	42,808
Colombie-Britannique	51,546	5,533	3,982	3,387	4,018	109	68,575
Yukon	66	-	42	-	51	-	159
TOTAL	493,574	132,586	41,235	11,869	47,514	599	727,377

* Montants versés au Québec par le ministère des Finances, (Évaluations), en vertu de la Loi sur les programmes établis (Arrangements provisoires).

TABLEAU 1

PAIEMENTS FÉDÉRAUX AUX PROVINCES
EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNÉE FINANCIÈRE 1972-1973

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projects d'adaptation au travail	Total
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	20,012	2,687	821	1,254	1,242	-	26,016
Île-du-Prince-Édouard	1,879	1,916	213	50	340	-	4,398
Nouvelle-Écosse	13,843	4,925	1,380	304	1,743	-	22,195
Nouveau-Brunswick	17,378	3,029	859	985	583	109	22,943
Québec*	183,690	77,114	13,351	-	19,000	-	293,155
Ontario	140,234	34,091	16,969	1,289	17,894	14	210,491
Manitoba	22,834	6,008	2,110	1,565	3,338	348	36,203
Saskatchewan	20,101	3,597	1,327	1,668	2,348	63	29,104
Alberta	40,168	3,211	3,751	569	5,040	365	53,104
Colombie-Britannique	53,282	4,840	3,849	3,049	4,719	182	69,921
Yukon	182	220	85	56	157	-	700
TOTAL	513,603	141,638	44,715	10,789	56,404	1,081	768,230

* Montants versés au Québec par le ministère des Finances, (Évaluations), en vertu de la Loi sur les programmes établis (Arrangements provisoires).

III - TABLEAUX ET DIAGRAMMES

des Allocations et services sociaux qui se rattachent au bien-être à l'enfance y compris la planification familiale et la réconciliation du divorce.

Outre ces réunions officielles, les échanges quotidiens normaux ont continué entre les experts-conseils des provinces et du Régime d'assistance publique du Canada. Plusieurs entretiens avec les provinces ont traité de l'amélioration des programmes d'assistance sociale et de la mise en usage des provisions de partage de frais du Régime d'assistance publique du Canada. Ces réunions ont permis aux conseillers du Régime de se maintenir au courant des progrès réalisés au niveau municipal et provincial.

Des entretiens tenus avec plusieurs provinces ont conduit au règlement des dernières demandes d'indemnité pour les premières années du Régime. À la fin de l'année, les coûts finals vérifiés avaient été acceptés par six provinces pour trois années financières tandis qu'une autre province avait accepté ces coûts pour cinq années.

d) Consultation fédérale-provinciale

Une conférence fédérale-provinciale sur les projets d'adaptation au travail a été tenue à Ottawa du 30 mai au 1er juin 1972. Les principaux objectifs de cette conférence étaient de:

- réviser la conception des projets d'adaptation au travail;

- assurer un moyen de partager les expériences;

- mettre au point des modes plus efficaces de réalisation des objectifs de ce programme;

- revoir les bases de la participation aux coûts aux termes de la Partie III du Régime d'assistance publique du Canada.

Une partie de la conférence était consacrée à la présentation de communications par des délégués et une autre à des commissions. On y a traité notamment du principe de l'adaptation au travail, du processus de planification, des procédures de sélection et de recrutement, de la méthode employée pour les projets, du rôle des services de la Main-d'oeuvre du Canada, du cours de spécialisation pour un nouveau départ donné en Saskatchewan et du processus d'évaluation. On a aussi discuté de la possibilité d'apporter des modifications au Règlement existant du Régime d'assistance publique du Canada, de la nouvelle méthode pour soumettre les projets d'adaptation au travail et, enfin, des critères d'évaluation de ces projets.

La réunion annuelle des représentants des ministères responsables du bien-être à l'enfance dans les provinces et les territoires, a eu lieu en juin. L'expert-conseil sur le bien-être à l'enfance de la Direction du Régime d'assistance publique du Canada a agi à titre de secrétaire. Les délégués ont discuté de questions telles que l'adoption internationale, les sévices exercés sur les enfants, les placements interprovinciaux en foyer nourricier, une enquête nationale sur la législation de bien-être à l'enfance et d'autres programmes de la Direction générale

à ce que les provinces lui fournissent des données plus complètes sur les programmes afin de justifier l'augmentation des demandes d'indemnité en vertu de cette disposition.

c) Réorganisation administrative

Le regroupement de la Direction du Régime d'assistance publique du Canada à l'intérieur de la Direction générale des Allocations et services sociaux, a été complété cette année. Les fonctions relatives au soutien du revenu et aux services de bien-être social ont été partagées entre deux divisions. La Division du Soutien du revenu a été chargée de la formulation des politiques, des services de consultation et des décisions concernant les programmes dans le domaine de l'administration de l'assistance publique, y compris les soins en foyers de soins spéciaux. C'est à la Division des Services de bien-être qu'il appartient de formuler la politique, d'assurer un service de consultation et de prendre les décisions requises dans le domaine du bien-être à l'enfance, des garderies et des autres services de bien-être social offerts aux nécessiteux ou aux personnes susceptibles de le devenir si ces services n'étaient pas offerts.

Depuis la nomination d'un expert-conseil en garderies et la création du Centre national d'information sur la garde de jour, l'activité dans ce domaine a augmenté sensiblement. En 1972-1973, le Centre national d'information sur la garde de jour a fondé une dépêche trimestrielle et a publié les documents suivants: Étude canadienne sur la garde de jour, La garde de jour des enfants et Services de garde de jour: Bibliographie.

Pendant l'année 1972-1973, les derniers accords administratifs ont été conclus pour le transfert de gestion de la Loi sur la réadaptation professionnelle des invalides du ministère de la Main-d'oeuvre et de l'Immigration à la Direction générale des Allocations et services sociaux. Le but en est de regrouper éventuellement sous une seule formule, le développement de l'ensemble des services de réadaptation au Canada.

II - ACTIVITÉS PENDANT L'ANNÉE 1972-1973

a) Accord fédéral-provincial

Au cours de l'année financière 1972-1973, un accord a été signé, avec le gouvernement des Territoires du Nord-Ouest, en vertu de la Partie I (Assitance générale et services de bien-être social) du Régime d'assistance publique du Canada. Toutes les provinces et les deux territoires font maintenant partie du Régime.

b) Modifications au Règlement

Plusieurs modifications dans les dispositions du Régime d'assistance publique du Canada touchant le partage des coûts, modifications mentionnées dans le rapport de 1971-1972, ont été entérinées et mises en vigueur en 1972-1973.

En novembre 1972, le Règlement du Régime d'assistance publique du Canada a été modifié dans le but d'accroître la participation du gouvernement fédéral au financement des projets d'adaptation au travail. Ces modifications permettent au gouvernement fédéral de partager les coûts suivants:

- traitements et frais de déplacement du personnel;
- allocations versées aux participants;
- location ou achat d'équipement ou dépréciation de celui-ci; location de terrains ou de locaux;
- matériel employé à la réalisation des projets et autres coûts d'exploitation.

Le Réglement a aussi été modifié pour permettre au gouvernement fédéral de partager certains frais additionnels des services de garderie tels que la location d'équipement ou de locaux, l'achat d'équipement, le coût de matériaux et autres frais d'exploitation.

Une autre modification permet d'étendre le partage des frais de services informatiques au-delà des salaires en y incluant les frais d'exploitation d'ordinateurs. Le gouvernement fédéral s'attendra

I - INTRODUCTION

Depuis sa création en 1966, le Régime d'assistance publique du Canada a été le principal moyen utilisé par le gouvernement fédéral pour supporter et encourager l'expansion des programmes provinciaux établis d'assistance sociale et de services de bien-être. Le Régime permet au gouvernement fédéral, grâce à certains accords, de payer 50% des dépenses partageables effectuées par les provinces et/ou leurs municipalités pour l'assistance publique et les services de bien-être social.

Avant 1966, le Canada prenait en charge une partie des dépenses des provinces pour le bien-être social dans le cadre de divers programmes administrés par les provinces. Le gouvernement fédéral partageait les coûts des régimes suivants: La Loi sur l'assistance-vieillesse (1951), la Loi sur les aveugles (1951), et la Loi sur les invalides (1954). Toutefois, il devint de plus en plus évident que ces programmes comportaient des critères d'admissibilité et des taux de versement trop restrictifs et rigides et qu'ils ne répondaient pas adéquatement aux besoins de personnes soumises à des situations fort diverses. La Loi sur l'assistance-chômage, créée en 1956, permettait le partage des coûts de l'assistance aux adultes, sur examen des besoins, sans restriction quant au montant de cette assistance. La plus grande faiblesse de cette Loi résidait dans le fait qu'elle excluait les coûts liés aux soins et à l'entretien des enfants sous la garde des autorités provinciales de bien-être à l'enfance.

À la suite d'entretiens entre les gouvernements provinciaux et fédéral, il a été décidé d'instaurer le Régime d'assistance publique du Canada. Ses buts principaux sont "l'instauration de mesures convenables d'assistance publique pour les personnes nécessiteuses" et "la prévention et l'élimination des causes de pauvreté et de dépendance de l'assistance publique".

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L'honorable Marc Lalonde
Ministre de la Santé nationale et du Bien-être social

Monsieur le Ministre,

Conformément aux dispositions de l'article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1973.

Je vous prie d'agréer, Monsieur le Ministre, l'assurance de mes sentiments dévoués.

Le Sous-ministre du Bien-être social,

A.W. Johnson

Son Excellence l'honorable Jules Léger, C.C., C.C.M., C.D., Gouverneur général et Commandant en chef du Canada.

QU'IL PLAISE A VOTRE EXCELLENCE,

J'ai l'honneur de présenter à Votre Excellence le Rapport annuel sur l'application du Régime d'assistance publique du Canada pour l'année financière terminée le 31 mars 1973.

Je vous prie d'agréer, Monsieur le Gouverneur général, l'assurance de mon profond respect.

Le Ministre de la Santé nationale
et du Bien-être social,

L'honorable Marc Lalonde

Régime d'assistance publique du Canada

1972-1973 Rapport annuel

RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA

72-73

RAPPORT ANNUEL

Santé et Bien-être social Canada
Health and Welfare Canada

57

NADA ASSISTANCE PLAN 73-74 ANNUAL REPORT



Health and Welfare Canada

Santé et Bien-être social Canada

Canada Assistance Plan

Annual Report

1973/74

His Excellency the Right Honourable Jules Léger
Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to Your Excellency the Annual Report on the Administration of the Canada Assistance Plan for the fiscal year ended March 31, 1974.

Respectfully submitted,

Marc Lalonde
Minister of National Health
and Welfare

The Honourable Marc Lalonde
Minister of National Health and Welfare

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1974.

Respectfully submitted,

A.W. Johnson
Deputy Minister of National Welfare

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I. INTRODUCTION

The Canada Assistance Plan is a shared cost program through which the federal government pays 50 per cent of the cost to the provinces and municipalities of providing social assistance to persons who are in need and 50 per cent of certain costs of providing welfare services to persons who are in need or likely to become in need if they do not receive such services. The Plan provides for federal sharing in the cost of care for persons in need who reside in recognized welfare institutions such as homes for the aged, nursing homes, child care institutions, and institutions for physically and mentally handicapped children and adults. The costs of maintenance of children who are in the care of child welfare authorities are also covered by the Plan. Through the Canada Assistance Plan the federal government also shares on a 50-50 basis in the costs of work activity projects which are designed to improve the employability of persons who have unusual difficulty in finding or retaining jobs or in undertaking job training.

The major objectives of the Plan are:

- to assist the provinces in developing a comprehensive assistance program for all persons who are in need for whatever cause;

- to encourage the provision of adequate levels of assistance which would permit recipients to maintain a decent standard of living;

- to support the development and extension of welfare services which would help prevent and remove the causes and effects of poverty, child neglect and dependence on public assistance;

- to promote the provision of adequate levels of institutional care for those who require it.

II. ADMINISTRATIVE ORGANIZATION

The Canada Assistance Plan is administered by the Social Allowances and Services Branch of the Department of National Health and Welfare.

The Income Support Division administers the social assistance provisions of the Plan, that is, all aspects of cost-sharing which relate to the payment of assistance to persons in need, including persons who reside in welfare institutions.

The Welfare Services Division is responsible for the development and application of policy in relation to the welfare services provisions of the Plan. Areas of activity include child welfare, day care, community development and other services provided to persons in need or likely to become in need if these services are not provided.

The Rehabilitation Services Division, which was established within the Branch during the fiscal year 1973/74, has assumed responsibility for the administration of the rehabilitation services components under Part I (General Assistance and Welfare Services) and Part III (Work Activity Projects) of the Canada Assistance Plan.

The Operational Planning and Evaluation Division collaborates with the other divisions of the Branch in the planning of significant modifications in program policy and administrative procedures, undertakes special planning or evaluation projects and studies on matters involving the Plan's program areas or its administration, and is responsible for consultation and liaison with the Department's central planning branches.

The responsibilities of the Operations and Finance Directorate include, in addition to the administration of a financial management and control system, the provision of administrative support services both in the field and at head office, the provision of financial consulting services to provinces, and the settlement of financial claims from provinces under the various programs operated by the Branch.

All four divisions and the Operations and Finance Directorate are responsible for developing and recommending policy proposals in their respective program areas, for providing consultative services to the provinces, and for reviewing provincial submissions with respect to programs and services to determine their eligibility for cost-sharing under the Canada Assistance Plan.

III. ACTIVITIES DURING 1973/74

1) Consultation on Changes in Provincial Programs

During the year the provinces introduced significant changes in their programs, legislation and administrative procedures which involved the Branch in a continuous process of consultation and review.

i) Social Assistance With respect to the social assistance provisions of the Canada Assistance Plan, changes took place in such program areas as special allowances for persons 65 years of age and over; the use of secured assistance; appeal procedures; fuel allowances; the indexing of social assistance rates to compensate recipients for increases in the cost of living; the transfer of recipients from programs for the blind and disabled to the provincial general assistance program; and overpayments of assistance.

Institutions for the mentally handicapped remained a major field of consultant activity as a number of provinces continued to convert mental hospitals and hospital-schools to welfare institutions, thereby making them eligible for federal cost-sharing under the Canada Assistance Plan. During the year, provincial submissions were handled involving over 20,000 institutional beds of which more than half were related to converted mental hospital facilities.

ii) Welfare Services In the field of welfare services, several provinces have been moving increasingly in the direction of universal access to certain services. As federal sharing with the provinces is limited, under the Canada Assistance Plan, to costs of services provided to persons who qualify on the basis of a needs test, or to persons who are likely to become in need unless such services are provided, a review was initiated to identify the criteria that have been developed by the provinces with respect to populations actually

utilizing these services and to identify the administrative procedures by which these criteria are applied. On the basis of the information obtained, a decision will be made as to whether further articulation of federal guidelines on cost sharing of welfare services is desirable.

As a result of the increasing interest in day care services for children, and the initiatives taken by a number of provinces in developing broad new programs, it was apparent that a more precise statement of the requirements for federal sharing in the cost of day care services was needed. As a result, a booklet, "Policy Guidelines Relating to the Provision of Day Care Services for Children under the Canada Assistance Plan" was issued in March 1974. The guidelines define the social and economic criteria on which shareable programs must be based as well as the attendant administrative conditions.

Other areas of consultative activity in the field of welfare services centred on community services to the retarded and changes in institutional programs, development of new child welfare legislation, new day care programs and the reorganization of a provincial department.

iii) Work Activity Under the work activity provisions of the Canada Assistance Plan, six new projects were approved during the year. The 46 projects that were in receipt of federal support in 1973/74 provided opportunities for 2,106 persons who had experienced difficulty in obtaining or holding employment to improve their motivation and work capacity through participation in programs designed to prepare them for return to employment or for further vocational upgrading. The work activity unit was increased in size, to four officers, to meet the growing demand for federal-provincial consultation and assistance in developing project submissions.

2) Federal-Provincial Studies

i) Review of Social Security in Canada

With the launching of the federal-provincial social security review in April 1973, the Branch participated in related studies and workshops and provided support, as required, to working groups involved in the review. The Director of Welfare Services and the Director of Rehabilitation Services were members of the federal delegation to the Working Party on Social Services. The Director of Rehabilitation Services also attended meetings of the Working Party on Employment. Since the Canada Assistance Plan is presently the major instrument for federal participation in provincial social assistance and welfare services programs, the outcome of the review is likely to have major implications for the future of the Plan.

ii) International Adoptions

In November 1973, a Federal-Provincial Committee on International Adoptions was formed in response to a conclusion of the Ministers of Welfare at their meeting in October 1973. The Committee was assigned the tasks of formulating proposals which would lead to uniform provincial policies with respect to international adoptions, and reporting on the essential requirements of a Canadian position on the subject of international adoptions. The child welfare consultant participated in the preparation and planning of two plenary committee meetings and numerous sub-committee meetings and contributed to the preparation of the Committee's report.

iii) Young Persons in Conflict with the Law

In December 1973, the Conference of Ministers of Corrections approved proposals of the Ministry of the Solicitor General and this Department for a joint review with the provinces

of the characteristics and needs of young persons in conflict with the law, the alternative approaches which might be taken in relation to programs, services and financial arrangements respecting these young persons, and the interface of these services with other social systems.

3) Other Activities

Apart from such formal meetings, the normal day-to-day interchange between officials of the provinces and the Canada Assistance Plan continued. Frequent communication with provincial officials centred on matters relating to the development of improved social assistance programs and the use of Canada Assistance Plan cost-sharing provisions. These discussions also enabled Canada Assistance Plan consultants to keep abreast of developments at the municipal and provincial levels.

IV. TABLES AND CHARTS

TABLE I

FEDERAL PAYMENTS TO THE PROVINCES
UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1973-1974

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Projects	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	16,763	4,155	1,018	1,066	1,667	-	24,669
Prince Edward Island	1,934	2,347	259	55	539	-	5,134
Nova Scotia	17,804	4,975	1,859	295	2,785	-	27,718
New Brunswick	21,328	2,090	934	1,069	4,030	650	30,101
Quebec*	184,454	90,280	22,225	-	21,541	-	318,500
Ontario	155,621	9,642	14,884	1,302	25,631	192	207,272
Manitoba	21,366	6,786	3,115	1,588	4,217	822	37,894
Saskatchewan	23,848	5,666	1,353	1,783	2,621	83	35,354
Alberta	38,502	2,994	4,136	198	6,332	494	52,656
British Columbia	57,621	8,918	6,049	3,341	7,371	41	83,341
Northwest Territories**	237	550	154	-	409	-	1,350
Yukon Territory	215	197	214	3	157	-	786
TOTAL	539,693	138,600	56,200	10,700	77,300	2,282	824,775

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance (estimated).

** Although the Northwest Territories signed an agreement under Part I of the Canada Assistance Plan in February 1973, no costs were claimed until this (1973-1974) fiscal year.

TABLE 2

FEDERAL PAYMENTS TO THE PROVINCES
UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1972-1973

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Projects	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	20,012	2,687	821	1,254	1,242	-	26,016
Prince Edward Island	1,879	1,916	213	50	340	-	4,398
Nova Scotia	13,843	4,925	1,380	304	1,743	-	22,195
New Brunswick	17,378	3,029	859	985	583	109	22,943
Quebec*	183,690	77,114	13,351	-	19,000	-	293,155
Ontario	140,234	34,091	16,969	1,289	17,894	14	210,491
Manitoba	22,834	6,008	2,110	1,565	3,338	348	36,203
Saskatchewan	20,101	3,597	1,327	1,668	2,348	63	29,104
Alberta	40,168	3,211	3,751	569	5,040	365	53,104
British Columbia	53,282	4,840	3,849	3,049	4,719	182	69,921
Yukon Territory	182	220	85	56	157	-	700
TOTAL	513,603	141,638	44,715	10,789	56,404	1,081	768,230

* Payments made to Quebec under the Established Programs (Interim Arrangements) Act through the Department of Finance.

TABLE 3

NUMBER OF PERSONS BEING ASSISTED UNDER THE
CANADA ASSISTANCE PLAN AS AT MARCH 31, 1974

PROVINCE	Child Care	Assistance Recipients*	Adults in Institutions	TOTAL
Newfoundland	2,066	63,250	1,650	66,966
Prince Edward Island	403	7,291	982	8,676
Nova Scotia	2,792	47,597	3,440	53,829
New Brunswick	3,029	51,879	1,907	56,815
Quebec	34,911	395,820	10,696	441,427
Ontario	13,599	317,283	24,398	355,280
Manitoba	4,581	60,681	1,161	66,423
Saskatchewan	3,006	44,404	4,444	51,854
Alberta	6,324	80,609	4,221	91,154
British Columbia	9,584	137,192	4,995	151,771
Yukon Territory	478	2,622	81	3,181
TOTAL	80,773	1,208,628	57,975	1,347,376

* Including dependants
Figures were not available for the Northwest Territories.

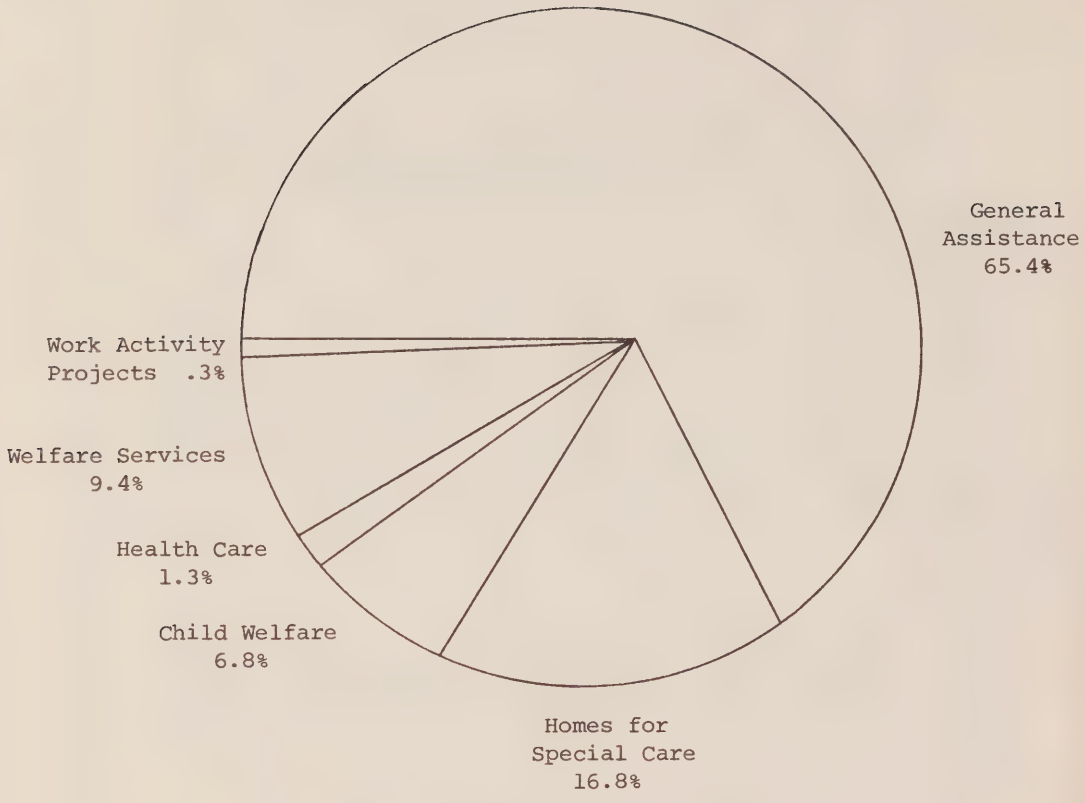


CHART 1 - ALLOCATION OF EXPENDITURES SHARED UNDER THE CANADA ASSISTANCE PLAN FISCAL YEAR 1973-74

Federal Payments to Provinces

The percentage increase in total federal payments was slightly higher in 1973/74 when compared with the increase in 1972/73. There were significant increases in the areas of general assistance, welfare services, child welfare and work activity. These increases, however, were partially offset by a decrease in the area of homes for special care.

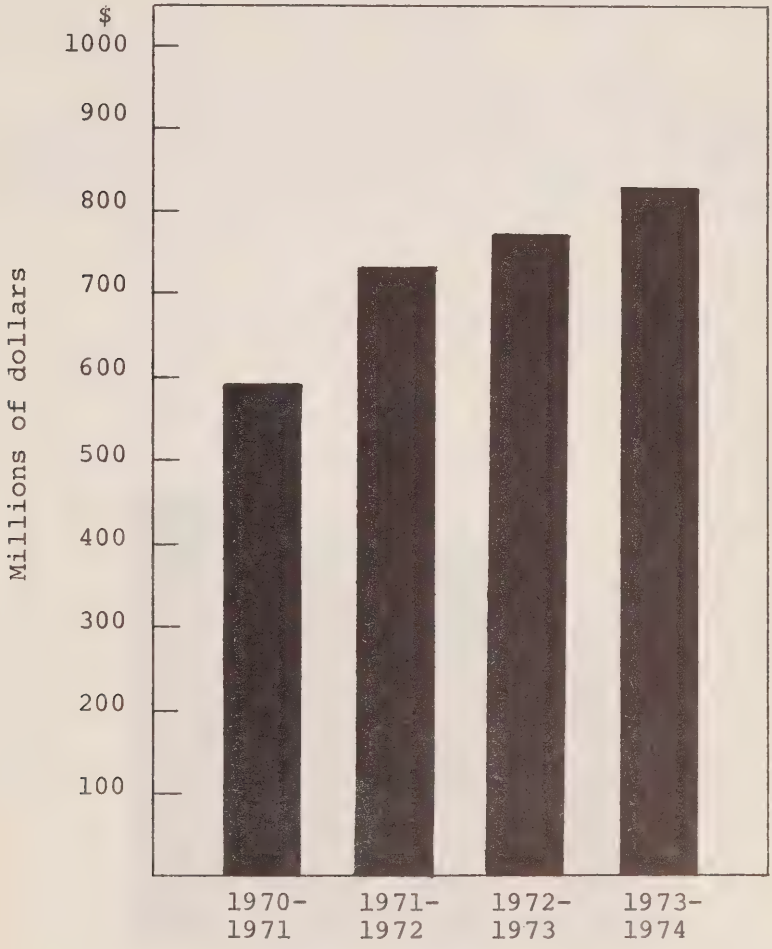


CHART 2 - TOTAL FEDERAL PAYMENTS UNDER THE CANADA ASSISTANCE PLAN including payments to Quebec under the Established Programs (Interim Arrangements) Act

General Assistance

While there was some reduction in the case load of recipients, the increase in general assistance costs was due primarily to increases in assistance rates necessitated by the rising cost of living during the year.

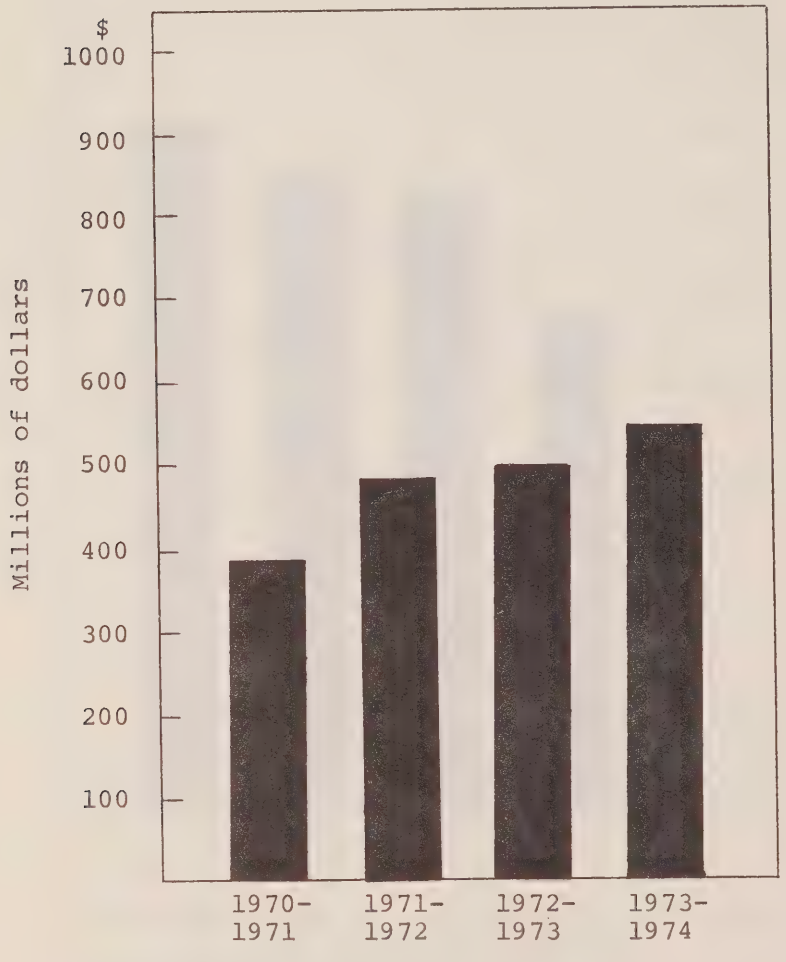


CHART 3 - GENERAL ASSISTANCE
- FEDERAL SHARE OF COSTS

Homes for Special Care

The decrease in costs in 1973/74 was due to the loss of federal sharing in those provinces which introduced universal programs for care in nursing homes. (Universal programs are not shareable under the terms of the Canada Assistance Plan.) The Minister of National Health and Welfare, at the request of the provinces affected, has undertaken to seek legislative authority under which such losses in federal sharing under the Canada Assistance Plan could be replaced in any province operating a universal nursing home care program.

The aforementioned decrease in costs was partly offset by the conversion, in certain provinces, of institutions for the mentally retarded from hospital-schools to welfare homes for special care, thus making their costs shareable under the Canada Assistance Plan.

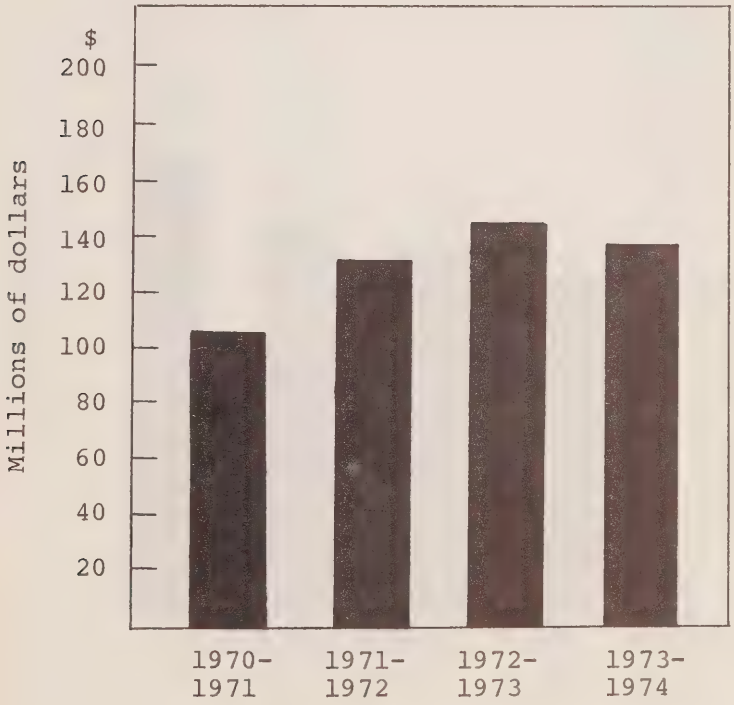


CHART 4 - HOMES FOR SPECIAL CARE
- FEDERAL SHARE OF COSTS

Child Welfare

Costs in this area increased substantially, reflecting the general increase in the cost of maintenance, salaries and services during the fiscal year. (Costs of institutional care for children are included in Chart 4.)

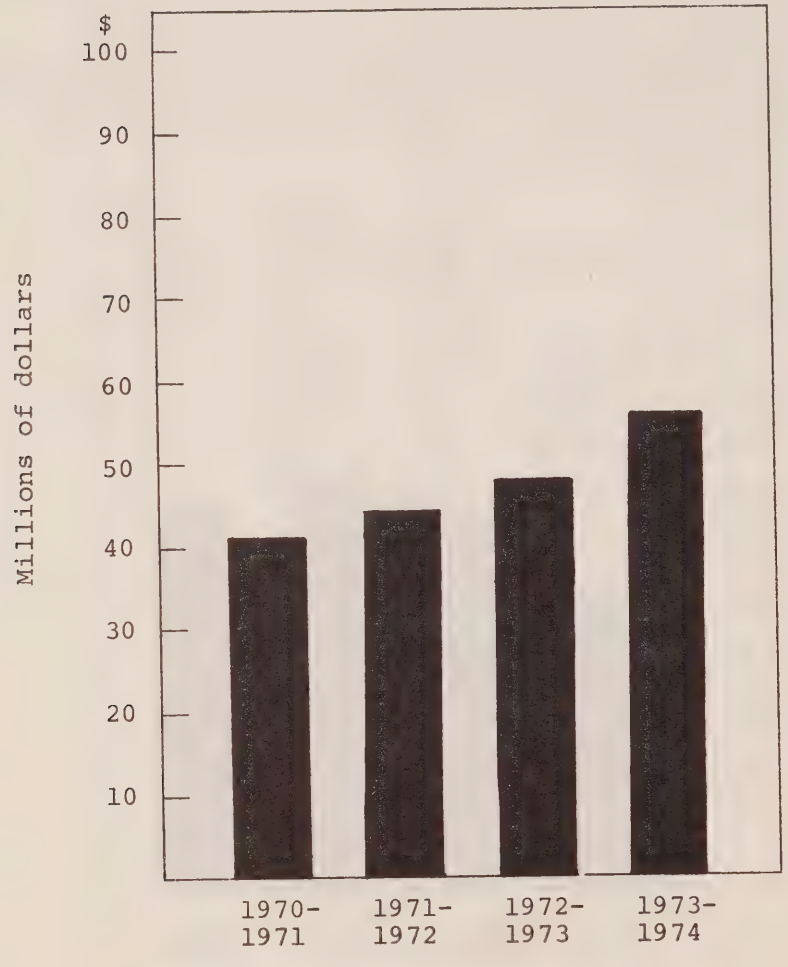


CHART 5 - CHILD WELFARE
- FEDERAL SHARE OF COSTS

Health Care

There was little change in the amount of federal payments to provinces towards the costs of health care, as costs increased slightly in some provinces and decreased in others. Payments in this area continue to represent a declining percentage of the total due to the operation of provincial insured or universal programs which cover such costs. For example, several provinces are providing certain health care services free of charge to all persons 65 and over. Such costs are not shareable under the Canada Assistance Plan.

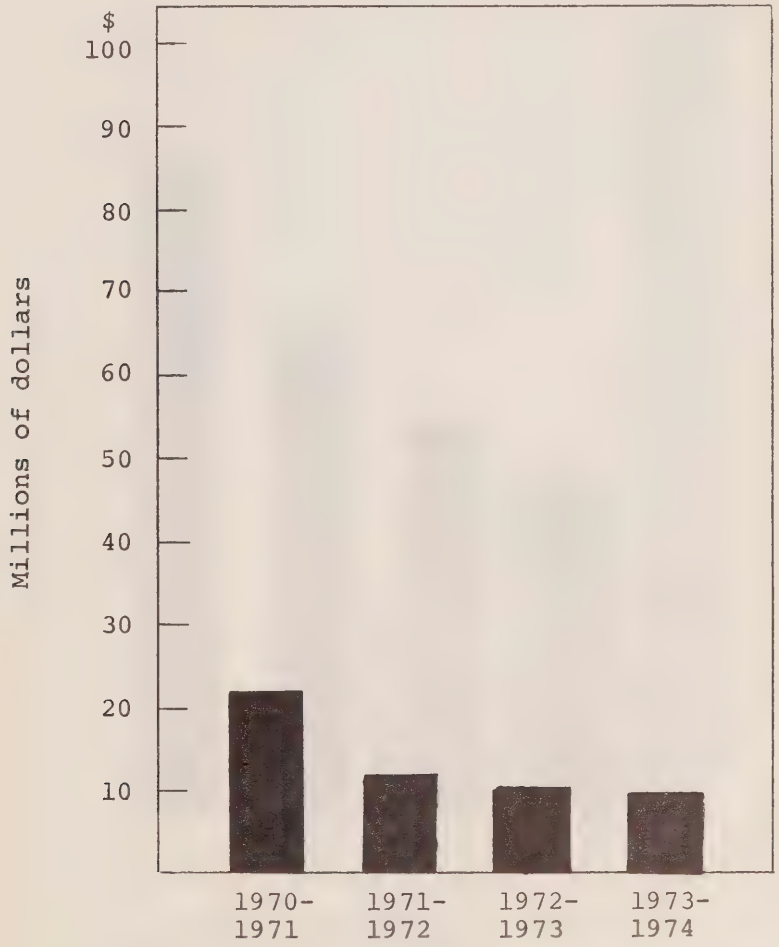


CHART 6 - HEALTH CARE FOR NEEDY PERSONS
- FEDERAL SHARE OF COSTS

Welfare Services

Until 1973/74 welfare service costs increased at a steady rate and represented a constant proportion of total payments under the Canada Assistance Plan. The more rapid increase in 1973/74 resulted in part from amendments to the regulations which broadened federal sharing in the areas of day care and administration of assistance programs but also from the increased importance which provinces are attaching to services.

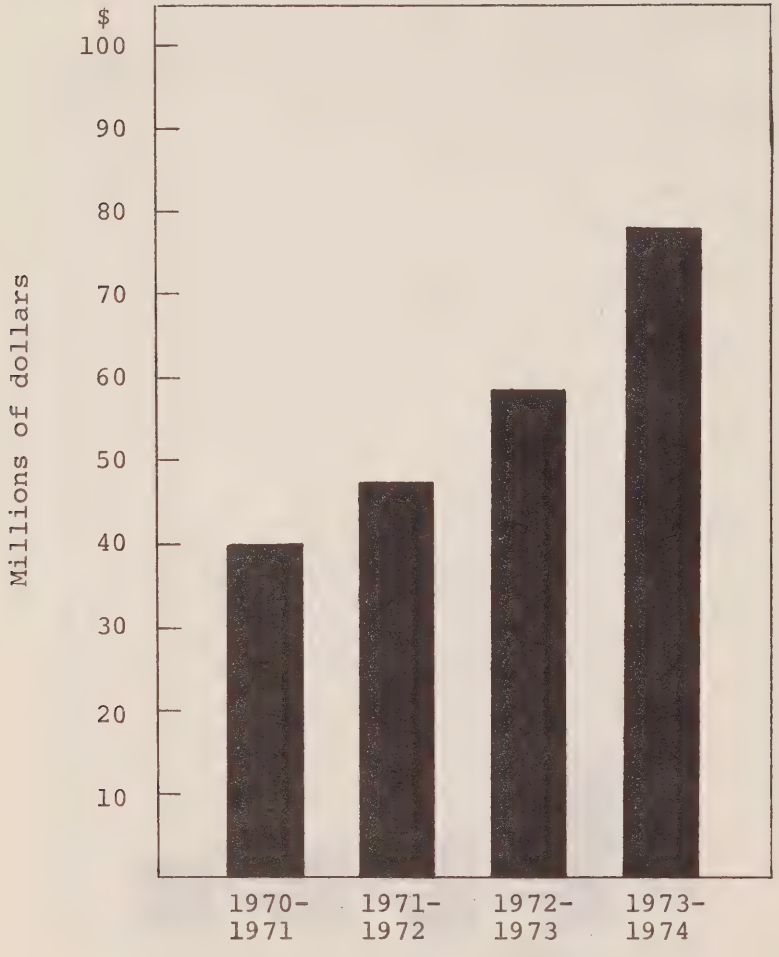


CHART 7 - WELFARE SERVICES
- FEDERAL SHARE OF COSTS

Work Activity

The increase in this area over 1972/73 was largely due to an increase in the number of participants and amendments to the regulations to permit the federal government to share in certain additional costs, such as the rental of equipment or premises, the purchase of equipment, the cost of materials and other operational costs.

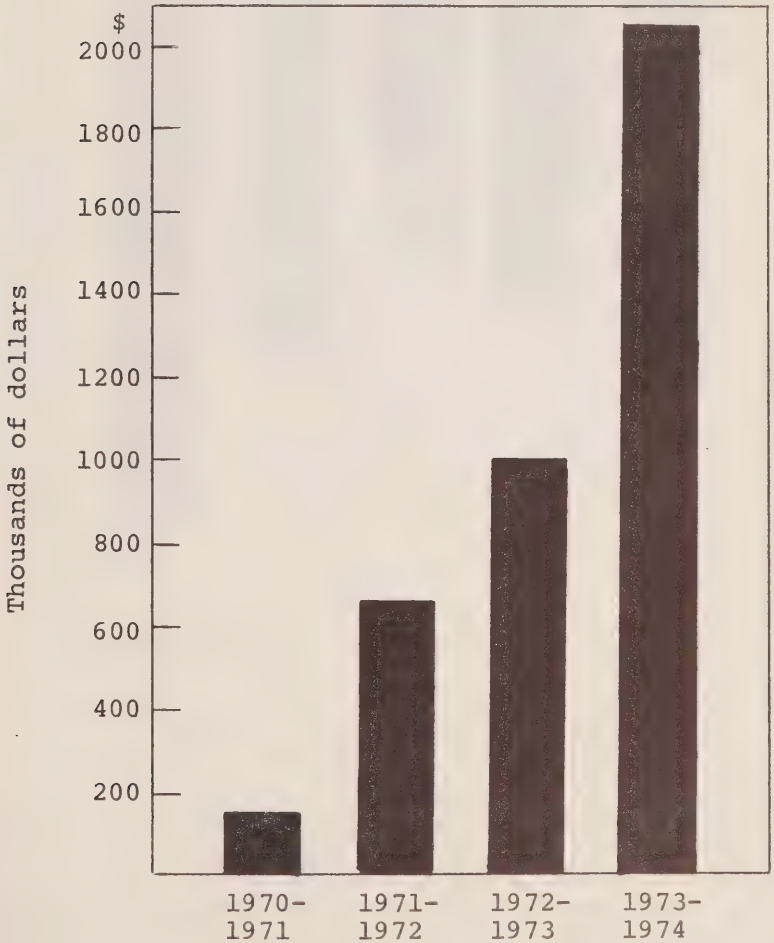


CHART 8 - WORK ACTIVITY PROJECTS
- FEDERAL SHARE OF COSTS

L'adaptation au travail

L'augmentation dans ce domaine par rapport à 1972-1973 est imputable en grande partie à l'accroissement du nombre de participants et aux modifications apportées au Règlement afin de permettre au gouvernement fédéral de partager certaines dépenses supplémentaires telles que la location de matériel ou de locaux, l'achat de matériel, le coût des matériaux et autres frais d'exploitation.

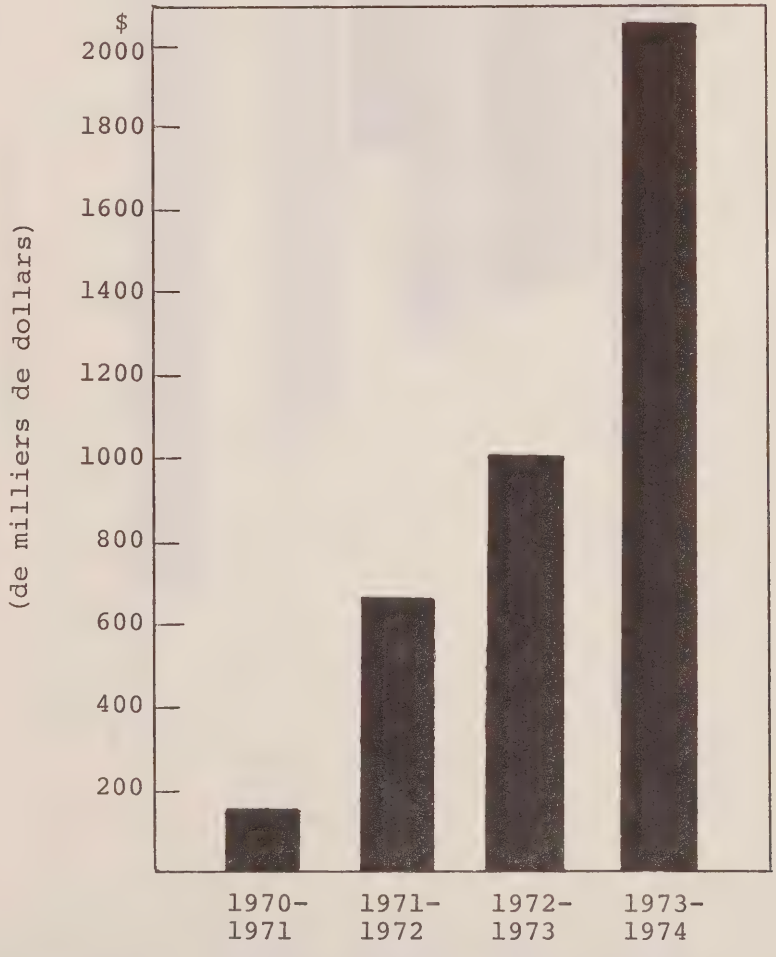


DIAGRAMME 8 - COÛTS DES PROJETS D'ADAPTATION AU TRAVAIL - CONTRIBUTION FÉDÉRALE

Services de bien-être social

Les coûts des services de bien-être social ont accusé un taux d'augmentation régulier jusqu'en 1973-1974 et ont représenté une proportion constante du total des paiements effectués aux termes du Régime d'assistance publique du Canada. L'accélération d'accroissement enregistrée en 1973-1974 a résulté en partie des modifications apportées au Règlement de façon à élargir le champ des dépenses partageables dans le domaine des garderies et de l'administration des programmes d'assistance, et aussi de l'importance croissante que les provinces attachent aux services.

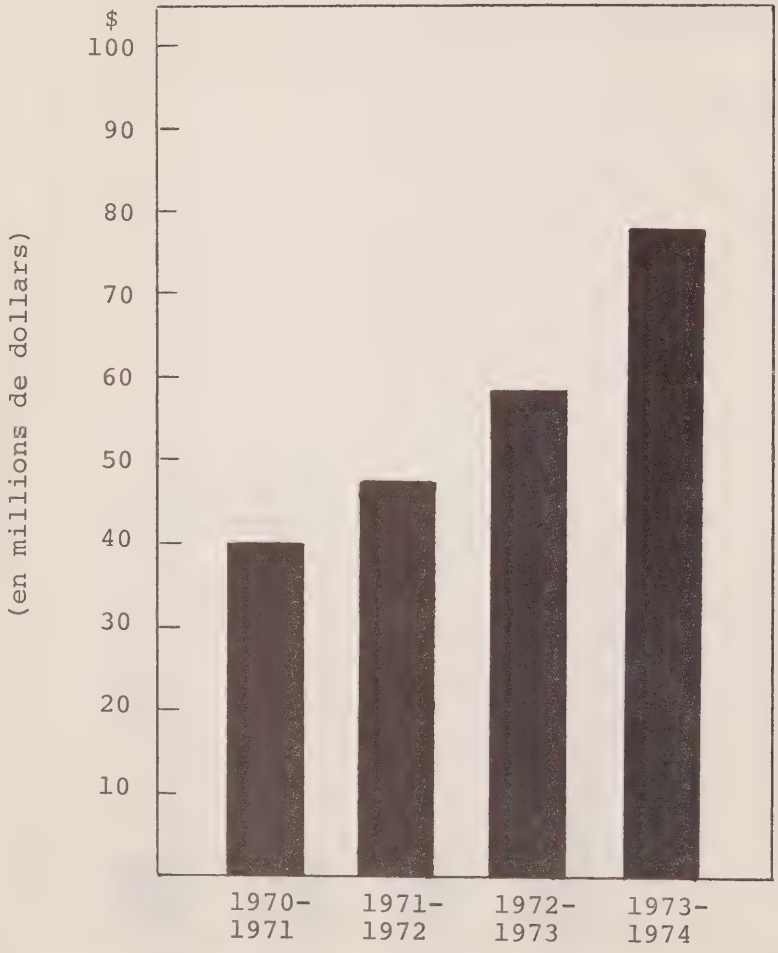


DIAGRAMME 7 - COÛTS DES SERVICES DE BIEN-ÊTRE SOCIAL - CONTRIBUTION FÉDÉRALE

Soins médicaux

Les frais de soins médicaux payés aux provinces n'ont guère varié, car les coûts ont augmenté dans certaines provinces et baissé ailleurs. Dans ce domaine, les dépenses fédérales en vertu du Régime d'assistance publique du Canada n'ont cessé d'accuser une chute proportionnelle par rapport au total, du fait que les dépenses en question sont remboursées par les assurances provinciales ou par les programmes universels. Par exemple, plusieurs provinces accordent certains soins médicaux gratuitement à toutes les personnes dont l'âge est égal ou supérieur à 65 ans. Le Régime d'assistance publique du Canada n'autorise pas le partage des dépenses d'une telle nature.

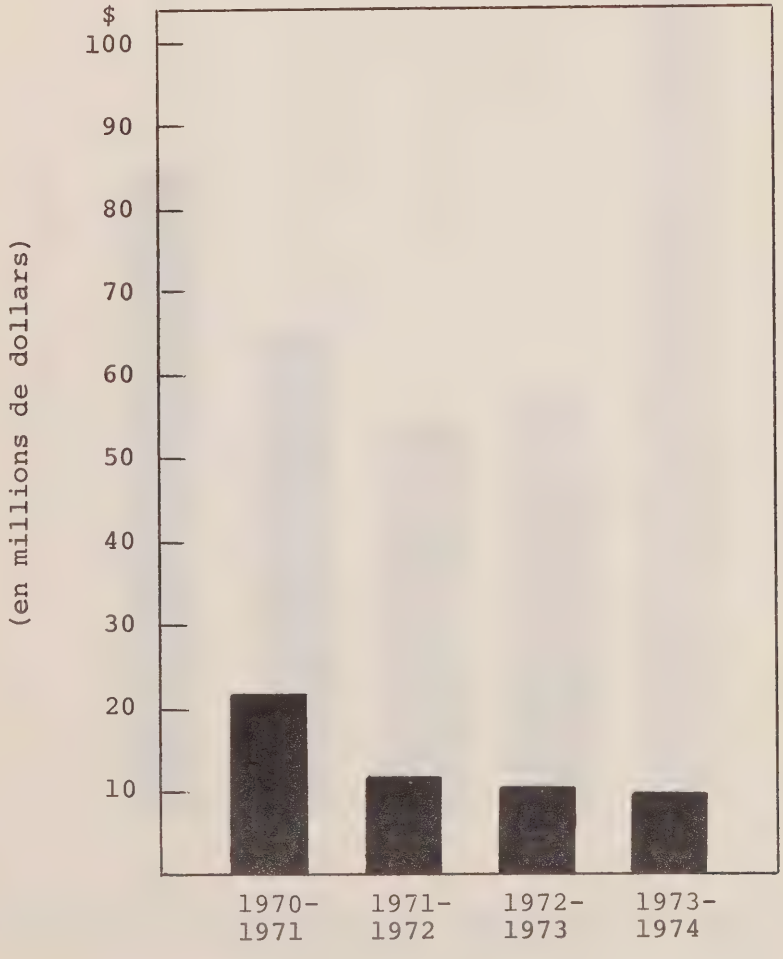


DIAGRAMME 6 - COÛTS DES SOINS MÉDICAUX POUR PERSONNES NÉCESSITEUSES - CONTRIBUTION FÉDÉRALE

Services de bien-être à l'enfance

Dans ce domaine, les coûts ont accusé une augmentation appréciable qui reflète l'accroissement général des sommes consacrées à l'entretien, aux salaires et aux services pendant l'année financière. (Les coûts des soins accordés aux enfants dans les établissements sont compris dans le Diagramme 4.)

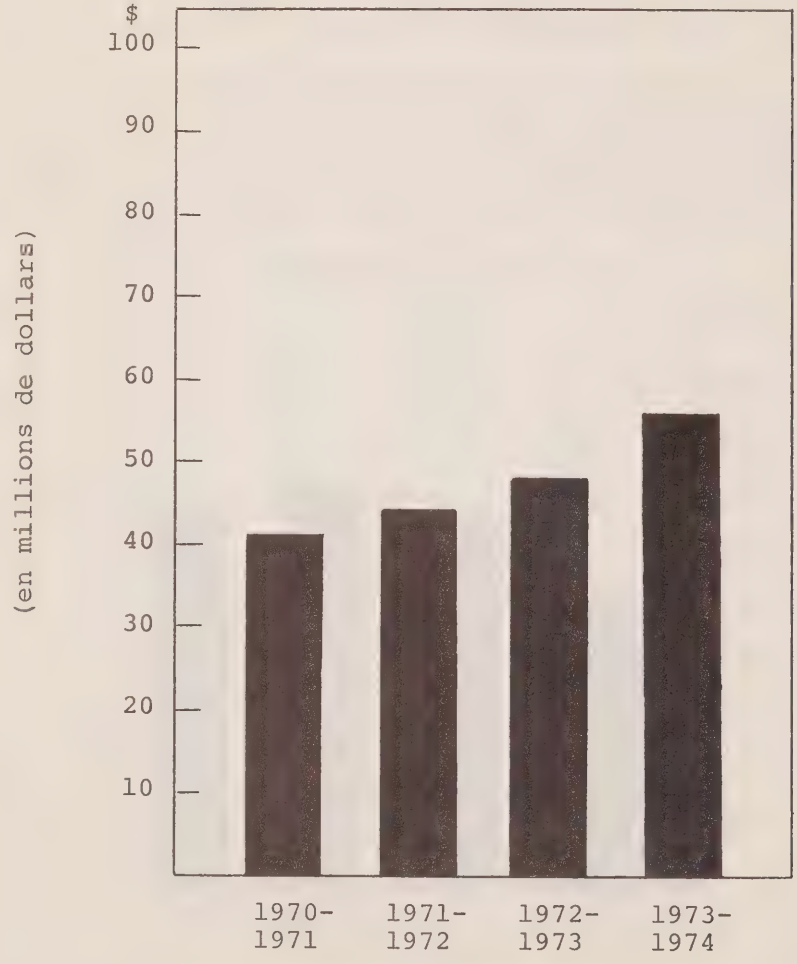


DIAGRAMME 5 - COÛTS DES SERVICES DE BIEN-ÊTRE À L'ENFANCE - CONTRIBUTION FÉDÉRALE

Foyers de soins spéciaux

La diminution de coût accusée en 1973-1974 est imputable au fait que le gouvernement fédéral n'a plus été tenu de partager les dépenses des provinces qui ont adopté des programmes universels de soins en maisons de repos. (Les dépenses des programmes universels ne sont pas partageables aux termes du Régime d'assistance publique du Canada.) A la demande des provinces en cause, le ministre de la Santé nationale et du Bien-être social s'est proposé de rechercher l'autorisation légale permettant de compenser la perte de contribution fédérale en vertu du Régime d'assistance publique du Canada, à l'intention des provinces qui ont adopté un programme universel de soins en maisons de repos.

La diminution de coût mentionnée précédemment a été partiellement contrebalancée du fait que dans certaines provinces, les établissements pour arriérés mentaux ont été transformés, d'hôpitaux-écoles en foyers de soins spéciaux, de sorte que leurs coûts deviennent partageables aux termes du Régime d'assistance publique du Canada.

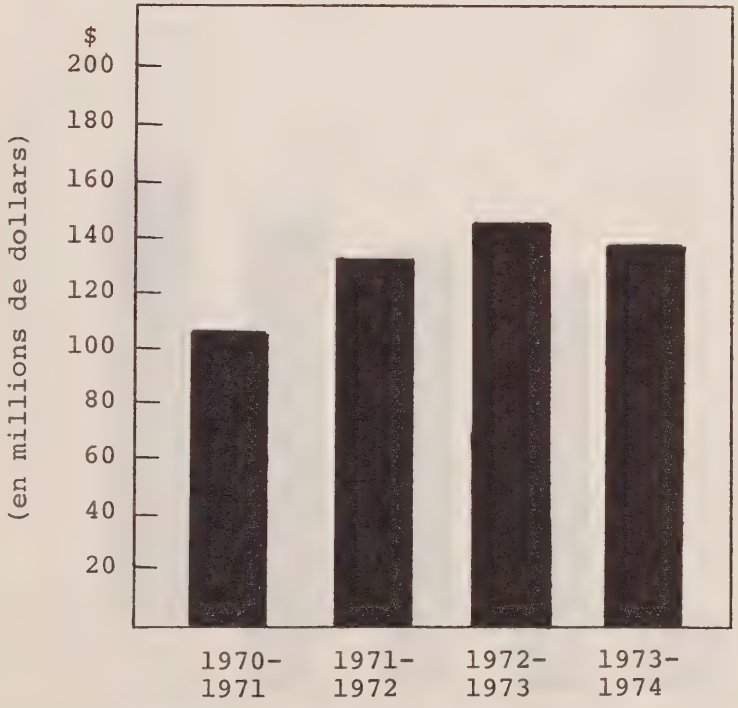


DIAGRAMME 4 - COÛTS DES FOYERS DE SOINS SPÉCIAUX - CONTRIBUTION FÉDÉRALE

Assistance générale

Bien que le nombre de bénéficiaires ait diminué, l'accroissement des frais d'assistance générale a été surtout imputable à la hausse des taux de prestation imposée par l'augmentation du coût de la vie au cours de l'année.

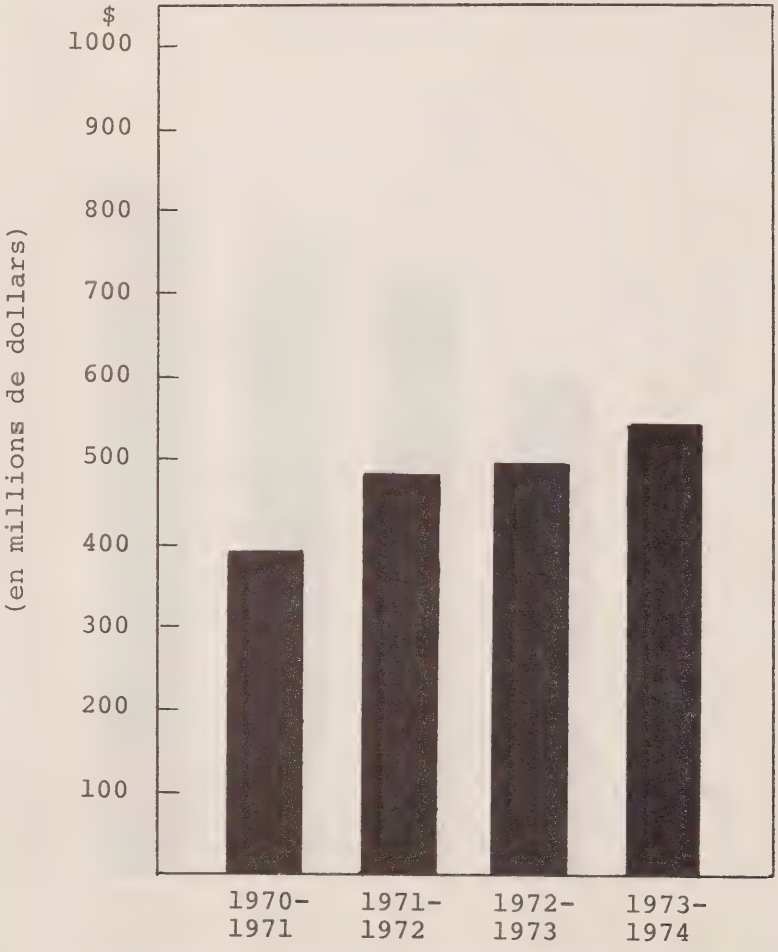


DIAGRAMME 3 - COÛTS DE L'ASSISTANCE GÉNÉRALE - CONTRIBUTION FÉDÉRALE

Paiements du gouvernement fédéral aux provinces

L'augmentation proportionnelle des paiements effectués par le gouvernement fédéral aux provinces a été légèrement supérieure en 1973-1974, par rapport à celle de 1972-1973. Il y a eu d'importantes augmentations dans les domaines de l'assistance générale, des services de bien-être social, du bien-être à l'enfance et de l'adaptation au travail; cependant, ces augmentations ont été partiellement contrebalancées par une diminution dans le domaine des foyers de soins spéciaux.

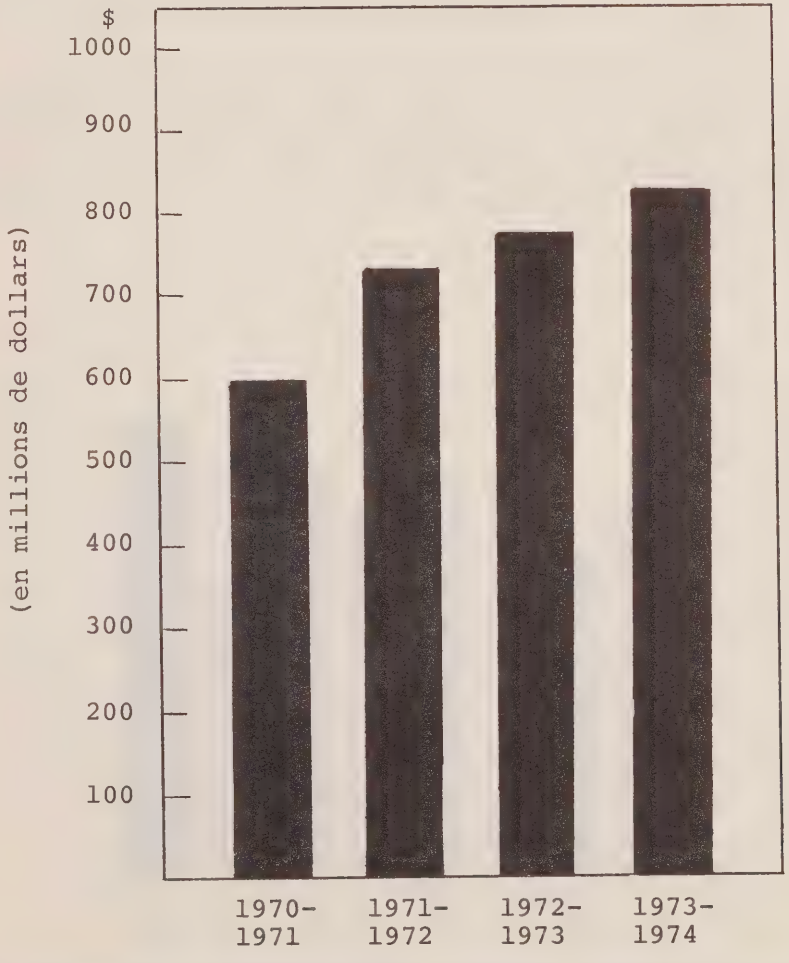


DIAGRAMME 2 - ENSEMBLE DES PAIEMENTS FÉDÉRAUX EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA y compris les montants versés au Québec en vertu de la Loi sur les programmes établis (Arrangements provisoires).

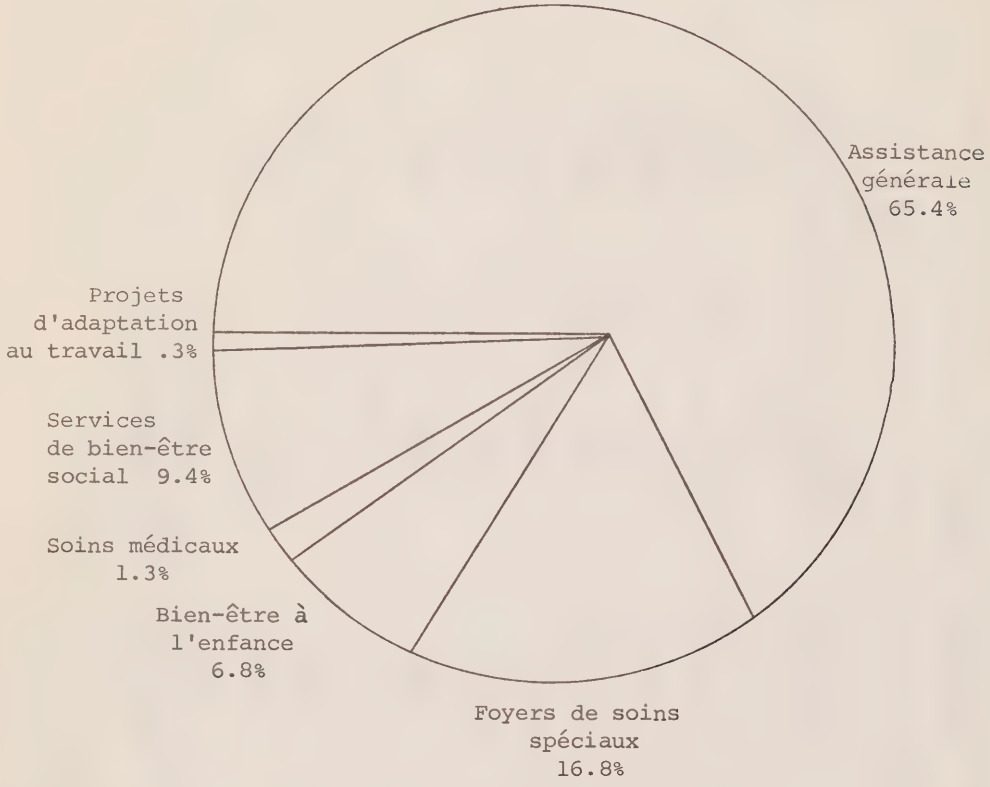


DIAGRAMME 1 - RÉPARTITION DES DÉPENSES PARTAGÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA ANNÉE FINANCIÈRE 1973-1974

TABLEAU 3

NOMBRE DE PERSONNES ASSISTÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA AU 31 MARS 1974

PROVINCE	Services à l'enfance	Assistés sociaux*	Adultes dans les foyers de soins spéciaux	TOTAL
Terre-Neuve	2,066	63,250	1,650	66,966
Île-du-Prince-Édouard	403	7,291	982	8,676
Nouvelle-Écosse	2,792	47,597	3,440	53,829
Nouveau-Brunswick	3,029	51,879	1,907	56,815
Québec	34,911	395,820	10,696	441,427
Ontario	13,599	317,283	24,398	355,280
Manitoba	4,581	60,681	1,161	66,423
Saskatchewan	3,006	44,404	4,444	51,854
Alberta	6,324	80,609	4,221	91,154
Colombie-Britannique	9,584	137,192	4,995	151,771
Territoire du Yukon	478	2,622	81	3,181
TOTAL	80,773	1,208,628	57,975	1,347,376

* Y compris personnes à charge

TABLEAU 2

PAIEMENTS FÉDÉRAUX AUX PROVINCES
EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNÉE FINANCIÈRE 1972-1973

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	20,012	2,687	821	1,254	1,242	-	26,016
Île-du-Prince-Édouard	1,879	1,916	213	50	340	-	4,398
Nouvelle-Écosse	13,843	4,925	1,380	304	1,743	-	22,195
Nouveau-Brunswick	17,378	3,029	859	985	583	109	22,943
Québec*	183,690	77,114	13,351	-	19,000	-	293,155
Ontario	140,234	34,091	16,969	1,289	17,894	14	210,491
Manitoba	22,834	6,008	2,110	1,565	3,338	348	36,203
Saskatchewan	20,101	3,597	1,327	1,668	2,348	63	29,104
Alberta	40,168	3,211	3,751	569	5,040	365	53,104
Colombie-Britannique	53,282	4,840	3,849	3,049	4,719	182	69,921
Territoire du Yukon	182	220	85	56	157	-	700
TOTAL	513,603	141,638	44,715	10,789	56,404	1,081	768,230

* Montants versés au Québec par le ministère des Finances, en vertu de la Loi sur les programmes établis (Arrangements provisoires).

TABLEAU 1

PAIEMENTS FÉDÉRAUX AUX PROVINCES
EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMMES, ANNÉE FINANCIÈRE 1973-1974

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	16,763	4,155	1,018	1,066	1,667	-	24,669
Île-du-Prince-Édouard	1,934	2,347	259	55	539	-	5,134
Nouvelle-Écosse	17,804	4,975	1,859	295	2,785	-	27,718
Nouveau-Brunswick	21,328	2,090	934	1,069	4,030	650	30,101
Québec*	184,454	90,280	22,225	-	21,541	-	318,500
Ontario	155,621	9,642	14,884	1,302	25,631	192	207,272
Manitoba	21,366	6,786	3,115	1,588	4,217	822	37,894
Saskatchewan	23,848	5,666	1,353	1,783	2,621	83	35,354
Alberta	38,502	2,994	4,136	198	6,332	494	52,656
Colombie-Britannique	57,621	8,918	6,049	3,341	7,371	41	83,341
Territoires du Nord-Ouest**	237	550	154	-	409	-	1,350
Territoire du Yukon	215	197	214	3	157	-	786
TOTAL	539,693	138,600	56,200	10,700	77,300	2,282	824,775

* Montants versés au Québec par le ministère des Finances, (Évaluations), en vertu de la Loi sur les programmes établis (Arrangements provisoires).

** Quoique les Territoires du Nord-Ouest aient signé, en février 1973, une entente avec le gouvernement fédéral en vertu de la Partie I du Régime d'assistance publique du Canada, aucune demande de partage de frais n'a été faite avant l'année financière 1973-1974.

IV. TABLEAUX ET DIAGRAMMES

aux services et aux dispositions financières concernant les jeunes délinquants, ainsi que la liaison entre les services en question et les autres régimes sociaux.

3) Autres activités

Outre ces réunions officielles, les échanges quotidiens normaux ont continué entre les fonctionnaires provinciaux et les experts-conseils du Régime d'assistance publique du Canada. Plusieurs entretiens avec les provinces ont traité de l'amélioration des programmes d'assistance sociale et de la mise en usage des provisions de partage de frais du Régime d'assistance publique du Canada. Ces réunions ont permis aux conseillers du Régime de se maintenir au courant des progrès réalisés au niveau municipal et provincial.

réadaptation a aussi participé à certaines réunions du Groupe de travail sur l'emploi. Étant donné que le Régime d'assistance publique du Canada est actuellement le principal moyen dont dispose le gouvernement fédéral pour participer aux programmes provinciaux d'assistance sociale et de services de bien-être social, le résultat de la révision en cours risque d'exercer des répercussions considérables sur l'avenir du Régime.

ii) Les adoptions internationales

En novembre 1973, un Comité fédéral-provincial des adoptions internationales a été formé en réponse à une décision des ministres du Bien-être social lors de leur réunion d'octobre 1973. Les fonctions du Comité ont consisté à formuler les projets permettant d'élaborer des politiques provinciales uniformes en ce qui a trait aux adoptions internationales et à présenter un rapport sur les exigences essentielles d'une position canadienne sur la question des adoptions internationales. L'expert-conseil en bien-être à l'enfance a participé à la préparation et à l'organisation de deux séances plénières du Comité, ainsi qu'à plusieurs séances des sous-comités et a collaboré à la préparation du rapport du Comité.

iii) La délinquance juvénile

En décembre 1973, la Conférence des ministres des Services correctionnels a approuvé les propositions présentées par le ministère du Solliciteur général et par le ministère de la Santé nationale et du Bien-être social, en vue de revoir, avec les provinces, les caractéristiques et les besoins des jeunes délinquants, les diverses solutions éventuelles ayant trait aux programmes,

ainsi que les modifications apportées aux programmes des établissements pour ces derniers; la préparation des nouvelles lois sur le bien-être à l'enfance; les nouveaux programmes de garderies; et la réorganisation d'un ministère provincial.

iii) L'adaptation au travail Au cours de l'année, six nouveaux projets ont été approuvés en vertu des clauses du Régime d'assistance publique du Canada relatives à l'adaptation au travail. Les 46 projets qui ont reçu l'appui du gouvernement fédéral en 1973-1974 ont permis à 2,106 personnes qui éprouvaient de la difficulté à obtenir ou à conserver un emploi, d'améliorer leur motivation ou leur aptitude au travail en participant aux programmes conçus pour les préparer à reprendre un emploi ou à poursuivre leur formation professionnelle. Il a fallu augmenter le personnel du groupe de l'adaptation au travail à 4 officiers de façon à répondre aux besoins croissants de consultation et d'aide fédérales-provinciales requises pour la préparation des soumissions de projets.

2) Les études fédérales-provinciales

i) La révision du système de sécurité sociale au Canada

Depuis le démarrage de la révision fédérale-provinciale du système de sécurité sociale au Canada, en avril 1973, la Direction générale a participé aux études et séances de travail qui y sont liées; elle a aussi fourni, au besoin, son support aux groupes de travail impliqués dans la révision. Le directeur des Services de bien-être et celui des Services de réadaptation faisaient partie de la délégation fédérale auprès du Groupe de travail sur les services sociaux. Le directeur des Services de

ii) Les services de bien-être social Dans le domaine des services de bien-être social, plusieurs provinces ont de plus en plus cherché à assurer un accès universel à certains services. Étant donné que le Régime d'assistance publique du Canada restreint le partage des frais entre le gouvernement fédéral et les provinces aux coûts des services dispensés aux personnes qui ont subies un examen de leurs besoins et ressources, ou aux personnes qui sont susceptibles de devenir nécessiteuses à moins de bénéficier des services en question, une révision a été entreprise en vue de déterminer les critères qu'ont établis les provinces en ce qui a trait aux populations qui utilisent vraiment les services et de définir les procédés administratifs par lesquels ces critères sont mis en vigueur. Les renseignements recueillis permettront de décider s'il faut encore remanier les directives fédérales relatives au partage des frais des services de bien-être social.

L'intérêt accru manifesté à l'égard des garderies d'enfants et les initiatives prises par plusieurs provinces en vue d'élaborer de nouveaux programmes plus compréhensifs ont fait ressortir la nécessité de délimiter avec plus de précision les exigences relatives au partage des coûts des garderies par le gouvernement fédéral. En conséquence, une brochure intitulée "Critères pour les services de garde de jour aux termes du Régime d'assistance publique du Canada" a été publiée en mars 1974. Cette publication définit les critères sociaux et économiques sur lesquels il convient de fonder les programmes partageables et les conditions administratives connexes.

Dans le domaine des services de bien-être social, les experts-conseils se sont occupés principalement des questions suivantes: les services communautaires destinés aux arriérés mentaux

III. ACTIVITÉS PENDANT L'ANNÉE 1973-1974

1) Consultation relative aux modifications des programmes provinciaux

Au cours de l'année, les provinces ont apporté des modifications importantes à leurs programmes, à leurs lois et à leurs procédés administratifs, si bien que la Direction générale a dû s'occuper sans cesse de consultation et de révision.

i) L'assistance sociale En ce qui concerne la provision de l'assistance sociale en vertu du Régime d'assistance publique du Canada, des modifications ont été apportées aux domaines suivants du programme: les allocations spéciales destinées aux personnes âgées de 65 ans et plus; l'utilisation d'une assistance remboursable; les procédures d'appel; les allocations de combustible; l'indexation des taux d'assistance sociale en vue d'offrir aux bénéficiaires une compensation tenant compte des augmentations du coût de la vie; le transfert des bénéficiaires des programmes pour aveugles et invalides au programme provincial d'assistance générale; et les paiements excédentaires d'assistance.

Une fois de plus, les experts-conseils se sont surtout penchés sur le domaine des établissements pour handicapés mentaux, car plusieurs provinces ont poursuivi la transformation des hôpitaux psychiatriques et hôpitaux-écoles, en institutions de bien-être social, de façon à bénéficier du partage des frais avec le gouvernement fédéral, en vertu du Régime d'assistance publique du Canada. Au cours de l'année, plus de 20,000 demandes présentées par les provinces au sujet des lits de foyers ont été revues; plus de la moitié des demandes se rapportaient aux hôpitaux psychiatriques qui avaient été transformés en établissements de bien-être social.

Les quatre divisions ainsi que la Direction des Opérations et finances sont chargées de développer et de faire des recommandations quant aux politiques du Régime relatives à leurs domaines respectifs, de fournir les services de consultation aux provinces et de revoir les demandes présentées par ces dernières en ce qui a trait aux programmes et services, afin de déterminer s'il y a lieu d'en partager les frais en vertu du Régime d'assistance publique du Canada.

II. ORGANISATION ADMINISTRATIVE

C'est à la Direction générale des Allocations et services sociaux, du ministère de la Santé nationale et du Bien-être social, qu'il incombe d'appliquer le Régime d'assistance publique du Canada.

La Division du Soutien du revenu applique les clauses du Régime relatives à la prestation d'assistance sociale, c'est-à-dire, tous les aspects du partage des frais requis pour assurer l'assistance aux personnes nécessiteuses, y compris celles qui demeurent dans les établissements de bien-être social.

La Division des Services de bien-être doit se charger de formuler et de mettre en vigueur la politique qui a trait aux clauses du Régime concernant les services de bien-être social. Les domaines d'activité comprennent: le bien-être à l'enfance, les garderies, les services de développement communautaire et les autres services offerts aux nécessiteux ou aux personnes susceptibles de le devenir si ces services n'étaient pas offerts.

La Division des Services de réadaptation, établie au sein de la Direction générale au cours de l'année financière 1973-1974, est chargée d'administrer les clauses du Régime concernant les services de réadaptation. Ces clauses figurent à la Partie I (Assistance générale et services de bien-être social) et à la Partie III (Projets d'adaptation au travail) du Régime d'assistance publique du Canada.

La Division de la Planification et de l'évaluation des opérations collabore avec les autres divisions afin d'élaborer les modifications importantes à la politique du Régime et à ses procédés administratifs. La Division entreprend des projets et études spéciales de planification et d'évaluation sur les sujets qui impliquent la politique ou l'administration du Régime. Elle est aussi responsable d'entretenir un réseau de consultation avec les directions centrales de planification du Ministère.

Il incombe à la Direction des Opérations et finances d'administrer un système de gestion et contrôle des finances, ainsi que de pourvoir au service de soutien administratif dans les bureaux régionaux comme dans le bureau chef. La Direction est aussi responsable d'offrir des services de consultation financière aux provinces et de régler les demandes financières d'indemnités des provinces en ce qui a trait aux programmes relevant de la Direction générale des Allocations et services sociaux.

I. INTRODUCTION

Le Régime d'assistance publique du Canada est le véhicule par lequel le gouvernement fédéral partage 50 pour cent des frais encourus par les provinces et les municipalités afin d'accorder l'assistance sociale aux personnes nécessiteuses. Le Régime prévoit aussi une quote-part fédérale de 50 pour cent de certains frais de services de bien-être social qui sont offerts aux personnes dans le besoin ou qui sont susceptibles de le devenir si elles ne reçoivent pas ces services. En vertu dudit Régime, le gouvernement fédéral partage les coûts des soins dispensés aux personnes nécessiteuses qui résident dans les établissements de bien-être social reconnus, tels que les foyers de vieillards, les maisons de repos, les institutions de soins pour enfants, ainsi que les établissements pour enfants et adultes physiquement ou mentalement handicapés. Le Régime s'étend également aux frais d'entretien des enfants confiés aux autorités provinciales de bien-être à l'enfance. En vertu du Régime d'assistance publique du Canada, le gouvernement fédéral paie aussi la moitié du coût des projets d'adaptation au travail conçus pour améliorer la capacité de travail des personnes qui éprouvent des difficultés exceptionnelles à obtenir ou à conserver un emploi, ou à entreprendre une formation professionnelle.

Le Régime à pour objectifs principaux:

- d'assister les provinces dans le développement de programmes compréhensifs ayant pour but d'aider toute personne dans le besoin pour n'importe quelle raison;

- d'encourager les mesures visant à maintenir des taux d'assistance permettant aux bénéficiaires de garder un niveau de vie raisonnable;

- d'appuyer l'établissement et l'élargissement des services de bien-être social qui peuvent contribuer à prévenir et à éliminer les causes et les effets de la pauvreté, de la négligence à l'égard des enfants et de la dépendance de l'assistance publique;

- de favoriser la prestation de soins convenables aux personnes nécessiteuses qui résident dans les foyers de soins spéciaux.

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L'honorable Marc Lalonde
Ministre de la Santé nationale et du Bien-être social

Monsieur le Ministre,

Conformément aux dispositions de l'Article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1974.

Je vous prie d'agréer, Monsieur le Ministre, l'assurance de mes sentiments dévoués.

Le Sous-ministre du Bien-être social,

A.W. Johnson

Son Excellence l'honorable Jules Léger,
Gouverneur général et Commandant en chef du Canada.

QU'IL PLAISE À VOTRE EXCELLENCE,

J'ai l'honneur de présenter à Votre Excellence le Rapport annuel sur l'application du Régime d'assistance publique du Canada pour l'année financière terminée le 31 mars 1974.

Je vous prie d'agréer, Monsieur le Gouverneur général, l'assurance de mon profond respect.

Le Ministre de la Santé
nationale et du Bien-être
social,

Marc Lalonde

Régime d'assistance publique du Canada

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Health and Welfare Canada

Santé et Bien-être social Canada

Canada Assistance Plan

Annual Report

1974/75

His Excellency the Right Honourable Jules Léger
Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to Your Excellency the Annual Report on the Administration of the Canada Assistance Plan for the fiscal year ended March 31, 1975.

Respectfully submitted,

Marc Lalonde
Minister of National Health
and Welfare

The Honourable Marc Lalonde
Minister of National Health and Welfare

Sir:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1975.

Respectfully submitted,

Bruce Rawson
Deputy Minister of National Welfare

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I. INTRODUCTION

The Canada Assistance Plan is a shared cost program through which the federal government pays 50 percent of the cost to the provinces and municipalities of providing social assistance to persons who are in need and 50 percent of certain costs of providing welfare services to persons who are in need or likely to become in need if they do not receive such services. The Plan provides for federal sharing in the cost of care for persons in need who reside in recognized welfare institutions such as homes for the aged, nursing homes, child care institutions, and institutions for physically and mentally handicapped children and adults. The costs of maintenance of children who are in the care of child welfare authorities are also covered by the Plan. Through the Canada Assistance Plan the federal government also shares on a 50-50 basis in the costs of work activity projects which are designed to improve the employability of persons who have unusual difficulty in finding or retaining jobs or in undertaking job training.

The major objectives of the Plan are:

- to assist the provinces in developing a comprehensive assistance program for all persons who are in need for whatever cause;

- to encourage the provision of adequate levels of assistance which would permit recipients to maintain a decent standard of living;

- to support the development and extension of welfare services which would help prevent and remove the causes and effects of poverty, child neglect and dependence on public assistance;

- to promote the provision of adequate levels of institutional care for those who require it.

II. CONSULTATION WITH RESPECT TO PROVINCIAL PROGRAMS

Field offices in nine provincial capitals have as their primary role to establish the eligibility and shareability of provincial welfare costs, to examine provincial claims under the various programs administered by the Branch, and to act as an information resource on the shareability of new program initiatives in the provinces. This latter role has become increasingly important because of the numerous changes in provincial programs.

1) Income Support

i) Social Assistance - During the year, work began on the preparation of four interim guidelines for Canada Assistance Plan sharing in provincial assistance programs. These guidelines relate to liquid asset exemption levels, supplementation of the low wage earner, earnings and work-related exemptions and special allowances related to age or disability.

ii) Homes for Special Care - On-site reviews of welfare institutions increased as provinces submitted many more institutional facilities for listing as homes for special care. The provinces also continued to convert mental hospitals and hospital-schools to welfare institutions thereby making them eligible for cost-sharing under the Canada Assistance Plan.

2) Welfare Services

i) Rehabilitation Services - Much of the emphasis with respect to the rehabilitation of mentally handicapped persons is shifting from institutional programs to

the provision of community services to integrate the mentally handicapped into regular social activities. A review of provincial programs was carried out through visits and consultation in response to a greater need for rehabilitation services, both social and vocational.

ii) Child Welfare and Youth Services - In December 1974, the Minister announced the establishment of an Adoption Desk which would serve to facilitate inter-provincial adoptions and to develop a procedure for placement of children from abroad. A full time program officer's position to work on procedural aspects of the Adoption Desk was established and filled.

As in the past, the Canada Assistance Plan Child Welfare Consultant attended the Meeting of Provincial and Territorial Representatives of Child Welfare and acted as secretary.

iii) Day Care Services - Since the introduction of the "Policy Guidelines Relating to the Provision of Day Care Services for Children under the Canada Assistance Plan" in March 1974, several provincial day care programs have been approved for cost-sharing purposes within the parameters of the Guidelines. As reported in "Status of Day Care in Canada 1974", published by the National Day Care Information Centre, there is an increasing interest in day care from both the private and public sectors. This has resulted in an increased demand for consultation with respect to these services.

iv) Other Welfare Services - A review of provincial policies and practices with respect to the criteria for claiming costs of welfare services under the Canada Assistance Plan was completed. The study indicated that most services for which costs were being claimed were provided either to assistance recipients or in conjunction with child welfare

services. The study did indicate, however, that a trend was developing towards extending services to a wider population, mainly persons with relatively low income. These findings, together with wider support by the provinces of community agencies, have resulted in the need for closer scrutiny of requests for cost-sharing in order to determine whether the clientele to be served as well as the nature of the service meet the requirements of the Canada Assistance Plan. This need was coupled with an increase of over 700 percent in the number of provincial requests for listing of agencies providing welfare services.

Consultation was also provided to two provinces with respect to the development of provincial policies and programs of homemaker services.

v) Research, Demonstration and Social Service Delivery - The Division together with members of the Operations and Finance Directorate participated in the development of a provincial proposal to formulate a comprehensive information system for a department of social services. Assessment of evaluation procedures for a research project as well as a number of proposals for Canada Assistance Plan research and demonstration funds were studied. On-site reviews of social service delivery systems were also carried out.

3) Work Activity

Under the Work Activity component of the Canada Assistance Plan, 10 new projects were approved during the year. The 56 projects that were in receipt of federal support in 1974-1975 provided opportunities for 2,212 persons who had experienced difficulty in obtaining or holding employment, to improve their motivation and work capacity through participation in programs

designed to prepare them for return to employment or for further vocational upgrading.

The emphasis in 1974-1975 was on clarifying program objectives with the provinces, and working to ensure inter-departmental coordination in the field of work activity. Preliminary work was also started with the Policy Research and Long Range Planning Branch on an evaluation of work activity projects across the country.

III. OTHER ACTIVITIES

Under the legislative authority of the Appropriation Act No. 4, 1974, two new federal-provincial agreements were signed.

Supplementary nursing home care benefits agreements were signed with the provinces of Ontario, Manitoba and Alberta to permit the replacement of Canada Assistance Plan revenues which were foregone by these provinces when they introduced universal nursing home care programs. As a result, the federal government paid $45.6 million to these provinces during the year ending March 31,1975. The agreements are effective until March 31, 1976, with the possibility of annual renewal thereafter.

Agreements were reached with the provinces of Ontario and New Brunswick to permit federal contributions to the cost of services to young offenders who are in the care of provincial correctional authorities. The services which are cost-shared are essentially the same as those provided in other provinces by child welfare authorities and which are shareable under the Canada Assistance Plan. By means of this special legislative arrangement, approximately $12 million is being provided to Ontario and New Brunswick,in 1974-1975, towards their costs of services to young offenders. These agreements are also effective until March 31, 1976, with the possibility of annual renewal.

The Directorate has been involved in various departmental and interdepartmental activities during the year.

The Consultant on Child Welfare and Youth Services participated in an Interdepartmental Committee on International Adoptions. The Committee, which also included representatives from the Departments of Manpower and Immigration, External Affairs, Justice and Secretary of State (Citizenship Branch), has as its main task the development of mechanisms for interpreting Canada's adoption laws abroad and for providing information on immigration procedures and requirements to provincial authorities and to prospective adopting parents.

With the cooperation of other branches in the Department, material on child abuse was prepared for the Standing Committee on Health, Welfare and Social Affairs to which the matter of child abuse has been referred for study by the House of Commons.

The Director of Welfare Services and the Consultant on Community Development Services participated in the review carried out by the Federal-Provincial Joint Working Group on Young Persons in Conflict with the Law. The working group, which included representatives from the Ministry of the Solicitor General and the correctional and child welfare services of each province and territory reviewed programs, services, financial arrangements and legislation dealing with young persons in conflict with the law. The final report of the Federal-Provincial Joint Review on Young Persons in Conflict with the Law was released in August 1974. Concurrent with this work, the Canada Assistance Plan has a representative on the Solicitor General's Committee on proposals for new legislation to replace the Juvenile Delinquent Act.

IV. TABLES AND CHARTS

TABLE 1

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1974-1975

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	22,923	5,250	1,136	2,233	1,679	-	33,221
Prince Edward Island	2,861	3,173	226	65	688	-	7,013
Nova Scotia	19,899	5,967	1,607	336	3,373	7	31,189
New Brunswick	27,822	1,329	943	1,127	3,415	588	35,224
Quebec	213,913*	119,653*	22,310*	11,100*	28,350*	714	396,040
Ontario	205,853	14,846	15,704	1,489	33,260	282	271,434
Manitoba	23,262	4,801	4,397	1,541	4,736	1,089	39,826
Saskatchewan	21,053	6,896	1,984	1,654	3,114	-	34,701
Alberta	44,428	4,115	5,376	5	6,796	49	60,769
British Columbia	101,939	14,429	8,324	3,173	11,624	332	139,821
Northwest Territories	3,231	1,324	218	72	1,246	-	6,091
Yukon Territory	241	266	6	-	227	-	740
TOTAL	687,425	182,049	62,231	22,795	98,508	3,061	1,056,069

* Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance.

TABLE 2

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1973-1974

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Projects	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	16,763	4,155	1,018	1,066	1,667	-	24,669
Prince Edward Island	1,934	2,347	259	55	539	-	5,134
Nova Scotia	17,804	4,975	1,859	295	2,785	-	27,718
New Brunswick	21,328	2,090	934	1,069	4,030	650	30,101
Quebec*	184,454	90,280	22,225	-	21,541	-	318,500
Ontario	155,621	9,642	14,884	1,302	25,631	192	207,272
Manitoba	21,366	6,786	3,115	1,588	4,217	822	37,894
Saskatchewan	23,848	5,666	1,353	1,783	2,621	83	35,354
Alberta	38,502	2,994	4,136	198	6,332	494	52,656
British Columbia	57,621	8,918	6,049	3,341	7,371	41	83,341
Northwest Territories**	237	550	154	-	409	-	1,350
Yukon Territory	215	197	214	3	157	-	786
TOTAL	539,693	138,600	56,200	10,700	77,300	2,282	824,775

* Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance. (estimated)

** Although the Northwest Territories signed an agreement under Part I of the Canada Assistance Plan in February 1973, no costs were claimed until this (1973-1974) fiscal year.

TABLE 3

NUMBER OF PERSONS BEING ASSISTED UNDER THE
CANADA ASSISTANCE PLAN AS AT MARCH 31, 1975

PROVINCE	Child Care	Assistance Recipients*	Adults in Institutions	TOTAL
Newfoundland	3,299	63,127	1,789	68,215
Prince Edward Island	621	8,401	1,120	10,142
Nova Scotia	2,839	52,358	3,431	58,628
New Brunswick	2,920	55,604	2,983	61,507
Quebec	33,042	416,558	11,321	460,921
Ontario	14,779	336,415	33,251	384,445
Manitoba	4,326	56,616	1,086	62,028
Saskatchewan	2,927	45,332	4,978	53,237
Alberta	10,884	77,970	3,414	92,268
British Columbia	9,700	162,349	6,859	178,908
Northwest Territories	n/a	5,711	n/a	5,711
TOTAL	85,337	1,280,441	70,232	1,436,010

* Including dependents
Figures were not available for the Yukon Territory

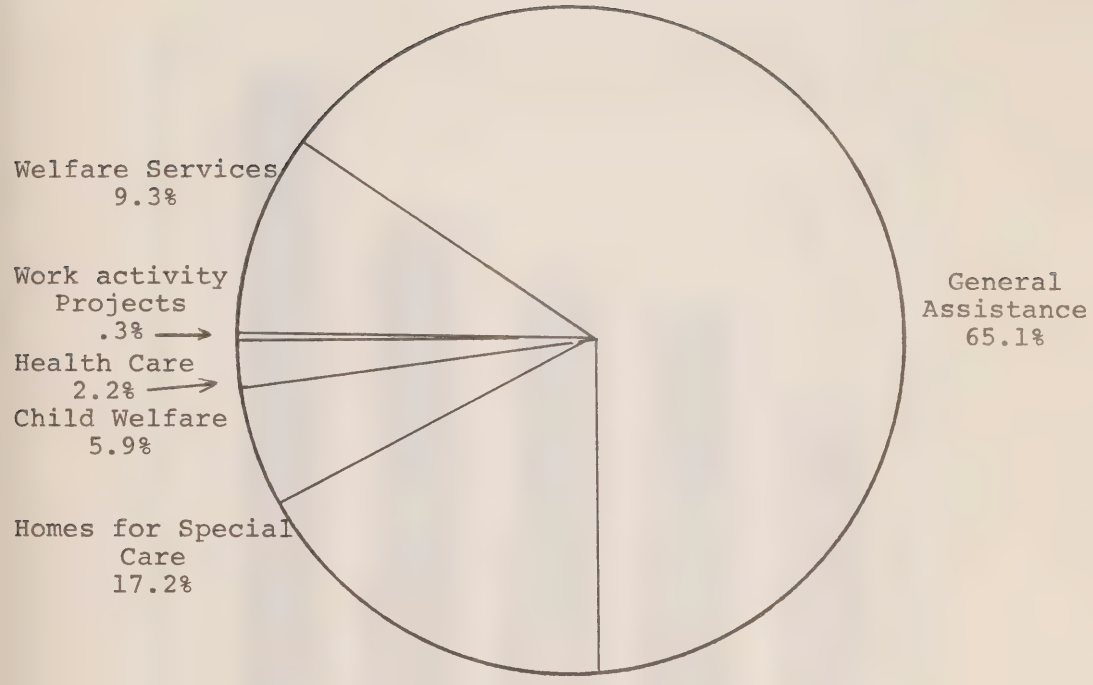


CHART 1 - ALLOCATION OF EXPENDITURES SHARED
UNDER THE CANADA ASSISTANCE PLAN
FISCAL YEAR 1974-1975

Federal Payments to Provinces

The percentage increase of total federal payments to the provinces over 1973-1974 is 28.0 which generally reflects increased costs of welfare programs mainly due to increased rate structures and clientele serviced.

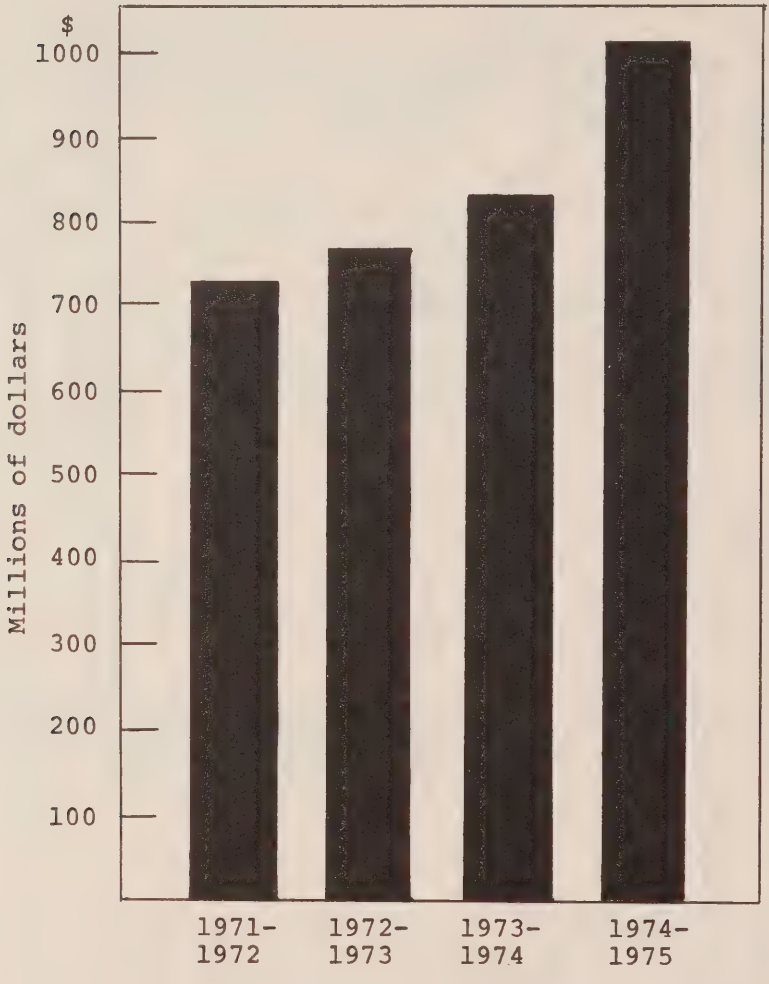


CHART 2 - TOTAL FEDERAL PAYMENTS UNDER THE CANADA ASSISTANCE PLAN including payments to Quebec under the Established Programs (Interim Arrangements) Act

General Assistance

The growth in general assistance costs in 1974-1975 was due to an expansion of the case load of recipients and a relatively large increase ($147 million, compared to $26 million in 1973-1974) in the federal share of assistance costs. Higher provincial assistance rates and the rising cost of living were the primary causes for the increase.

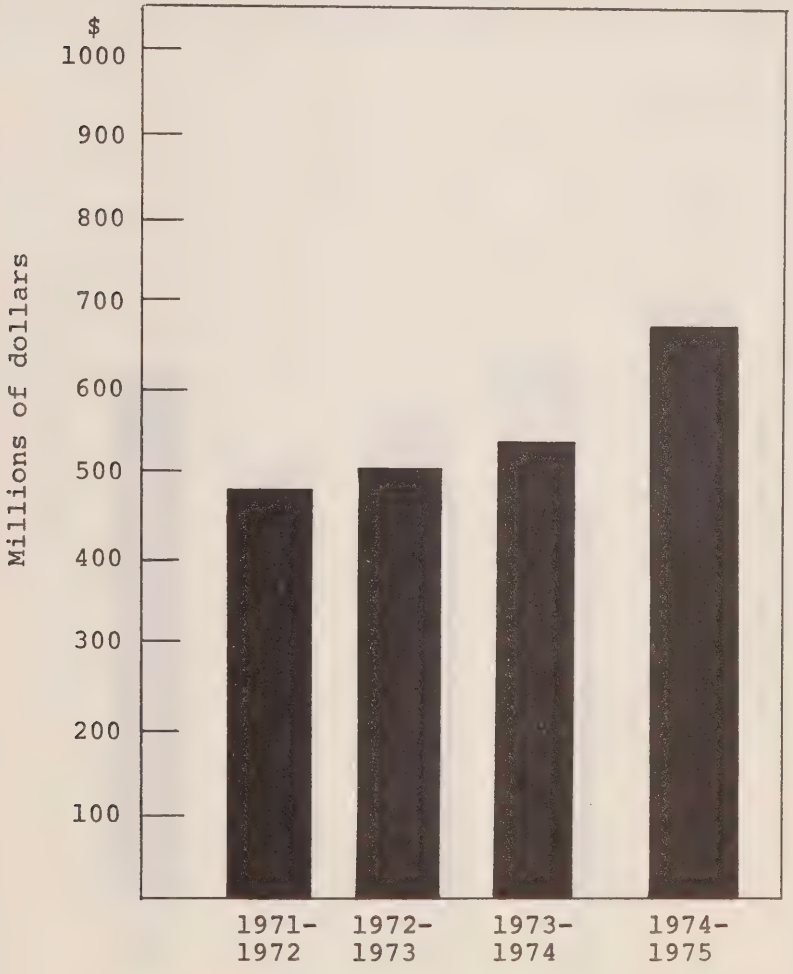


CHART 3 - GENERAL ASSISTANCE
- FEDERAL SHARE OF COSTS

Homes for Special Care

The increase of federal contributions in 1974-1975 towards the costs of care in a home for special care was a result of the continuing trend in several provinces to convert institutions for mentally handicapped persons, such as hospital schools and mental hospitals, to welfare institutions which are eligible for cost-sharing under the Canada Assistance Plan Agreement.

In addition there has been a general increase in the cost of providing institutional care in most provinces which is reflected in a higher cost of assistance to persons in need.

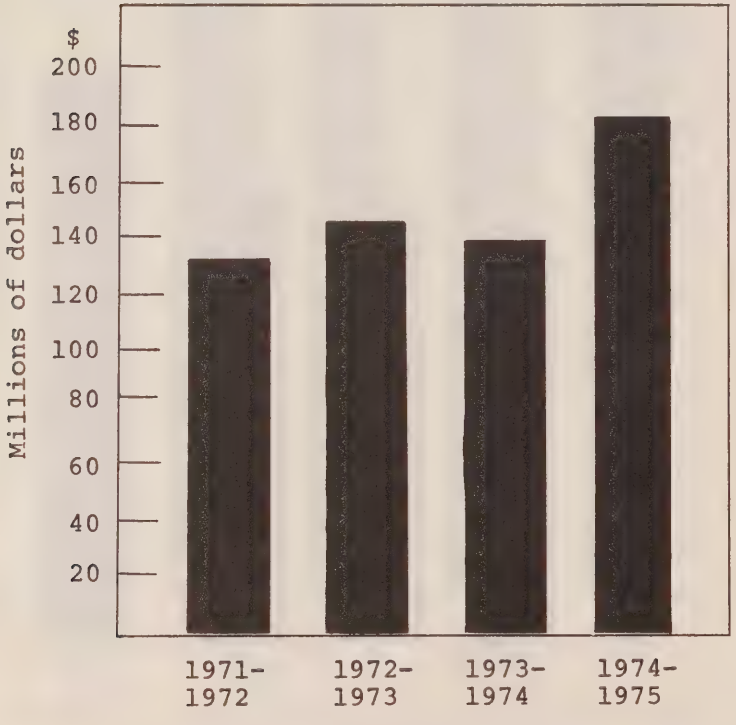


CHART 4 - HOMES FOR SPECIAL CARE
- FEDERAL SHARE OF COSTS

Child Welfare

Although there has been a decrease in the child care caseload in 1974-1975, increased costs are attributable to higher costs of maintenance, salaries and services.

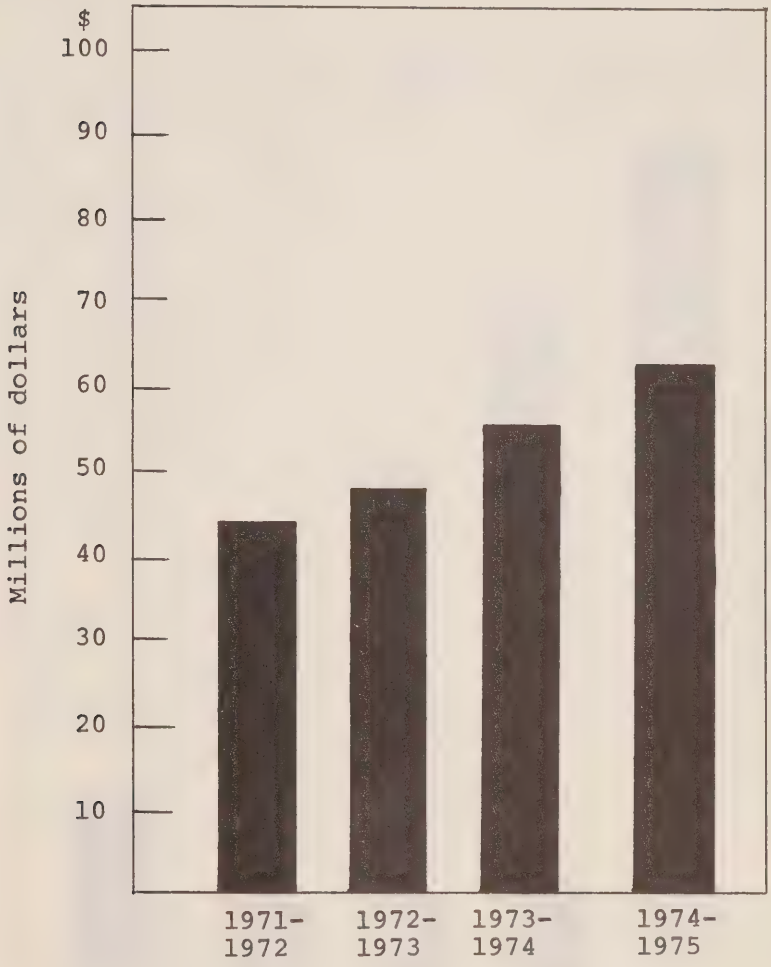


CHART 5 - CHILD WELFARE
- FEDERAL SHARE OF COSTS

Health Care

A sharp rise in the amount of federal payments to provinces towards the costs of health care services in 1974-1975 was largely a result of the entry of new programs in Quebec which had been under consideration since 1972. The increased federal contributions include adjustments for costs incurred in previous years.

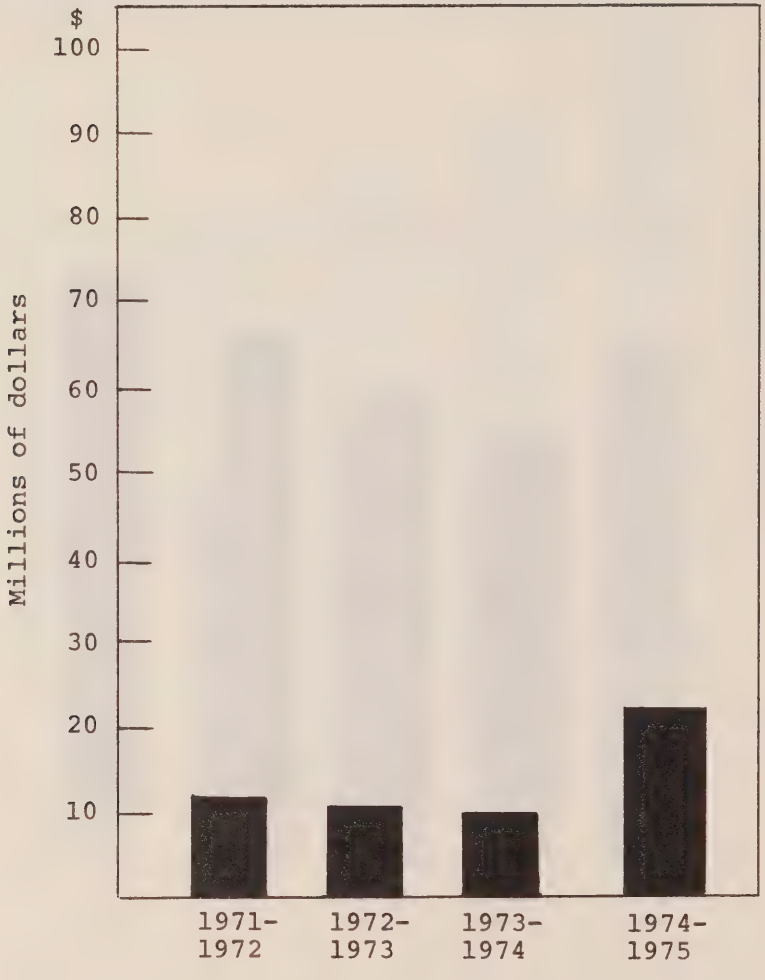


CHART 6 - HEALTH CARE FOR PERSONS IN NEED
- FEDERAL SHARE OF COSTS

Welfare Services

The rapid increase in federal contributions experienced in 1973-1974 continued during 1974-1975. This was the result of a general increase in the cost of providing welfare services, the increased importance that the provinces are attaching to services and amendments to the regulations which broadened federal sharing in the areas of day care and the administration of assistance programs.

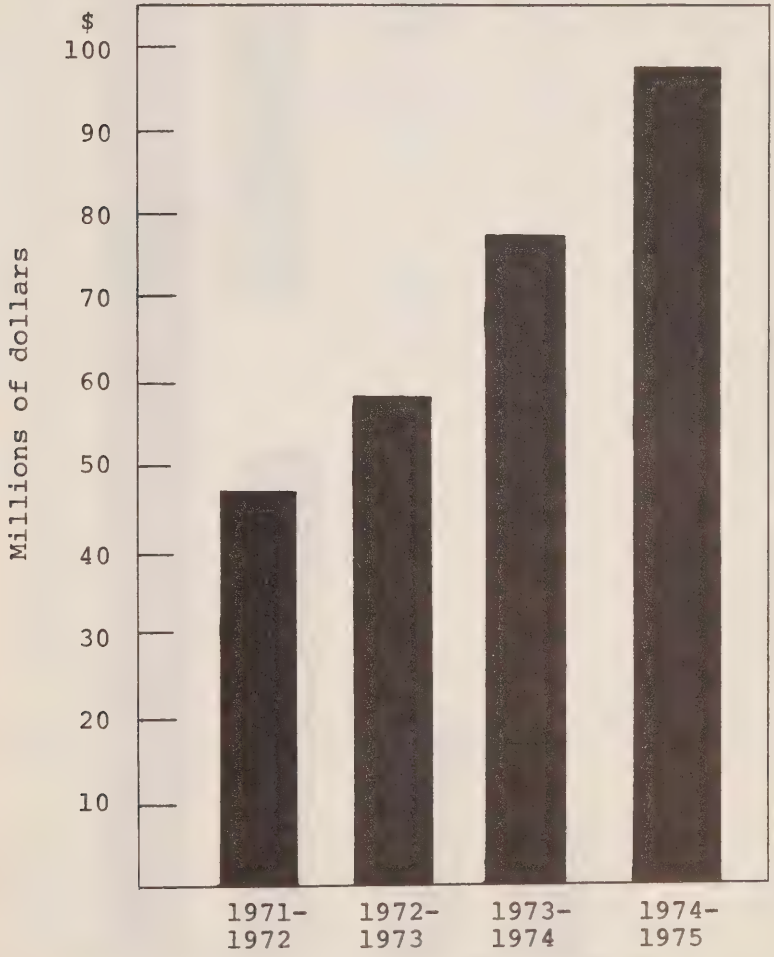


CHART 7 - WELFARE SERVICES
- FEDERAL SHARE OF COSTS

Work Activity

The increase in this area over 1973-1974 can be attributed to increased concern for the large number of unemployed and the increased utilization by the provinces of appropriate measures, including Work Activity, to meet the needs of those persons who for personal, family and/or environmental reasons required a program of social rehabilitation to prepare them for employment.

During this period additional emphasis was placed upon the promotion of the program through consultation with provincial officials.

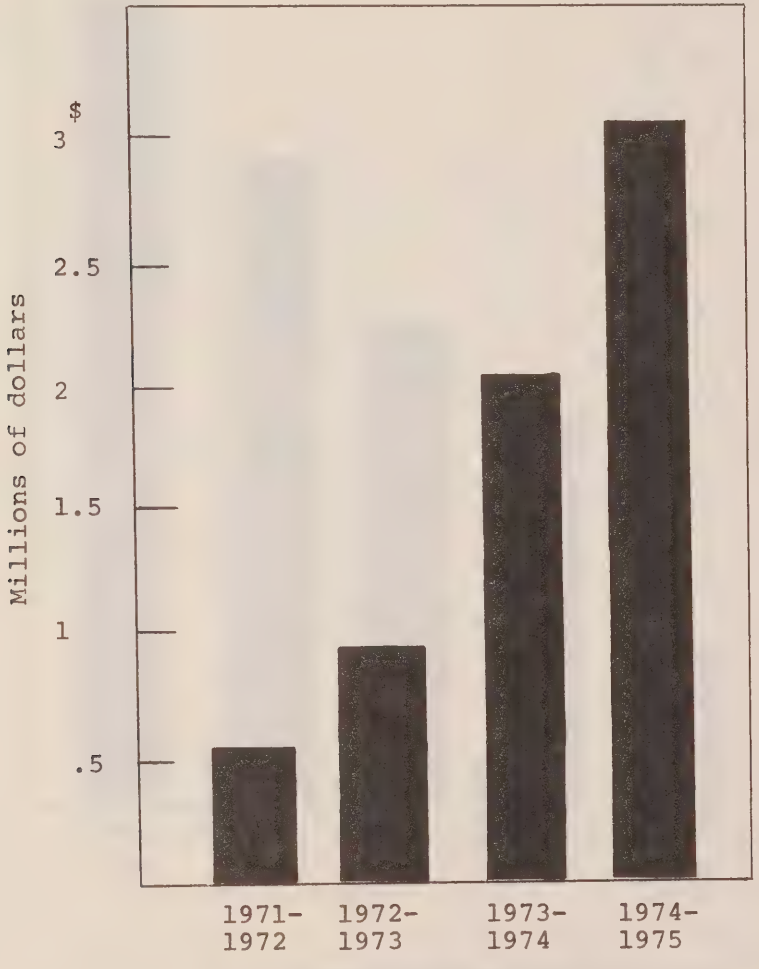


CHART 8 - WORK ACTIVITY PROJECTS
- FEDERAL SHARE OF COSTS

Adaptation au travail

L'augmentation enregistrée dans ce domaine par rapport à 1973-1974 peut être attribuée au fait que les provinces se sont davantage souciées du grand nombre de chômeurs et ont appliqué un plus grand nombre de mesures appropriées, dont l'adaptation au travail, afin de répondre aux besoins des personnes qui, pour des raisons individuelles, familiales et (ou) sociales, requièrent un programme de réadaptation sociale pour se préparer au travail.

Au cours de cette période, l'accent a été mis sur la promotion du programme, en multipliant les consultations avec les autorités provinciales.

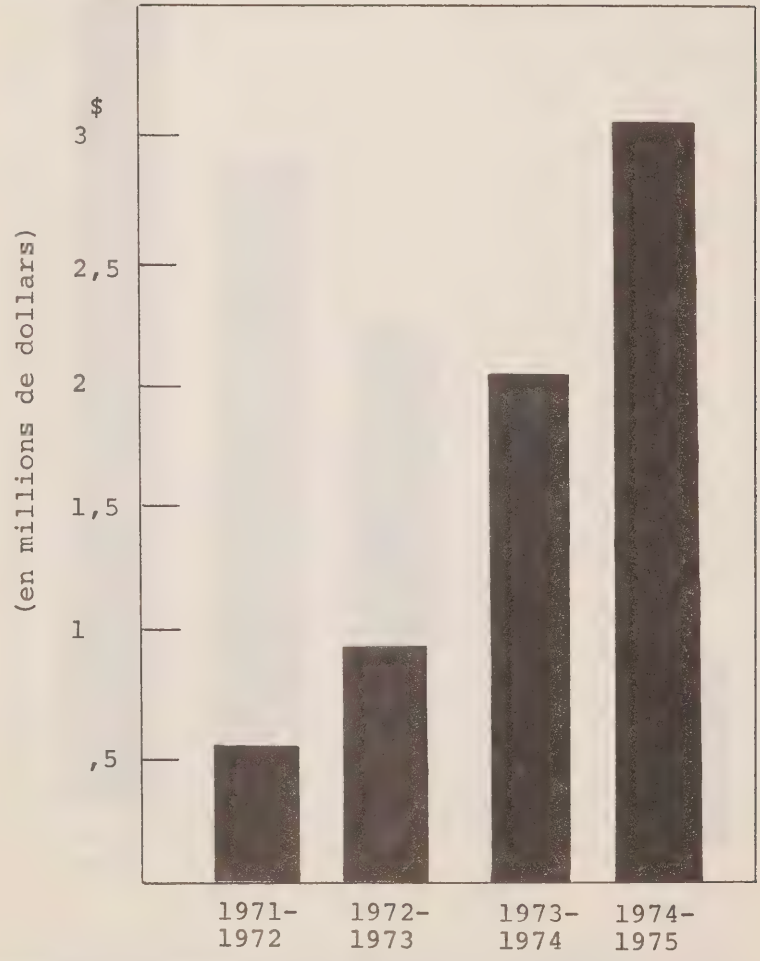


DIAGRAMME 8 - COÛTS DES PROJETS D'ADAPTATION AU TRAVAIL - CONTRIBUTION FÉDÉRALE

Services de bien-être social

La hausse rapide survenue dans les contributions fédérales en 1973-1974 se poursuit en 1974-1975. Elle a été causée par l'augmentation générale du coût de la prestation des services de bien-être social, l'importance accrue accordée par les provinces aux services et les modifications apportées au Règlement, qui étendent la participation fédérale dans le secteur des garderies et de l'administration des programmes d'assistance.

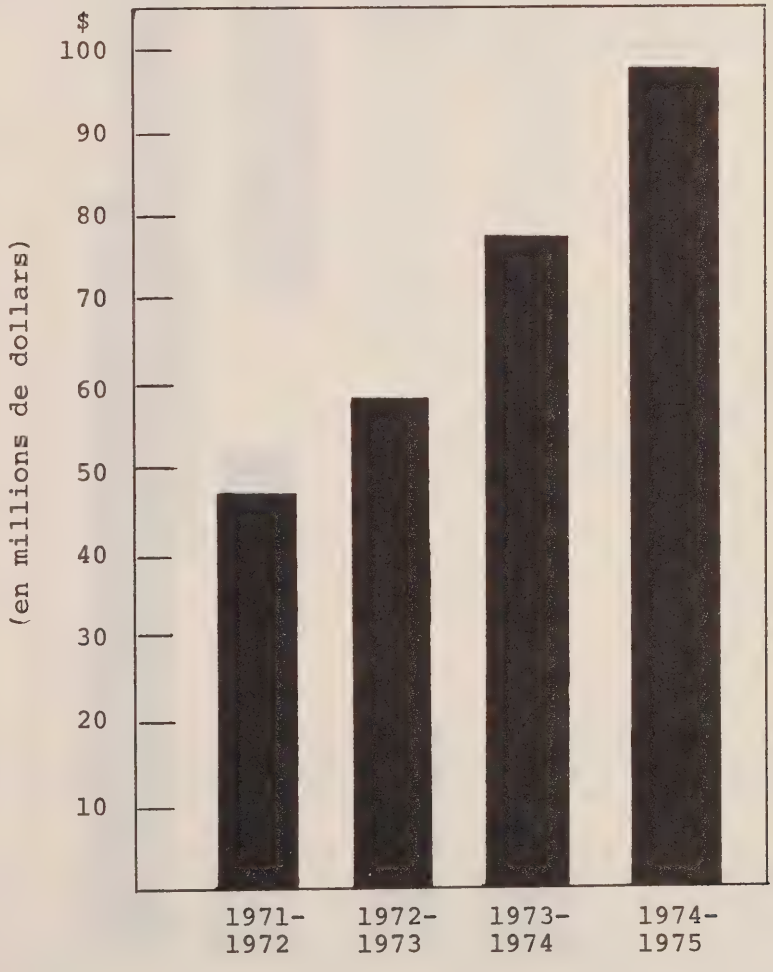


DIAGRAMME 7 - COÛTS DES SERVICES DE BIEN-ÊTRE SOCIAL - CONTRIBUTION FÉDÉRALE

Soins médicaux

En 1974-1975, la hausse sensible des paiements du gouvernement fédéral aux provinces pour supporter le coût des soins médicaux a été causée en grande partie par l'application au Québec de nouveaux programmes qui étaient à l'étude depuis 1972. Les contributions du gouvernement fédéral comprennent aussi le rajustement pour les dépenses engagées au cours des années précédentes.

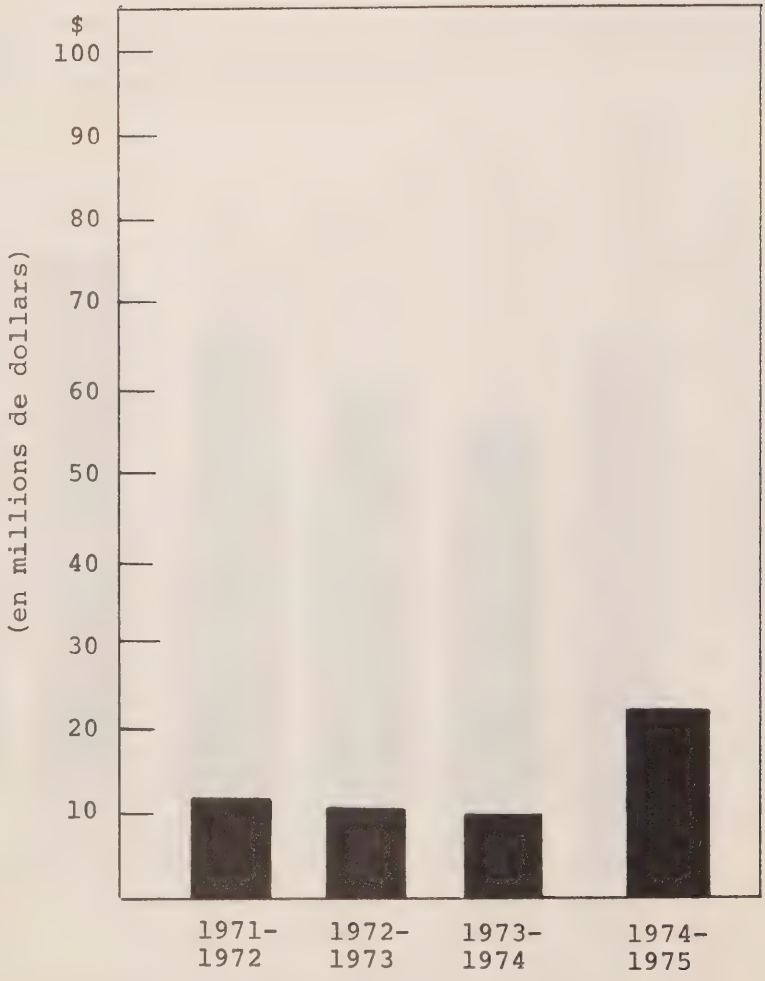


DIAGRAMME 6 - COÛTS DES SOINS MÉDICAUX POUR PERSONNES DANS LE BESOIN - CONTRIBUTION FÉDÉRALE

Services de bien-être à l'enfance

Bien que le nombre de cas traités ait diminué en 1974-1975, la hausse des coûts est imputable à l'augmentation du coût de l'entretien, des traitements et des services.

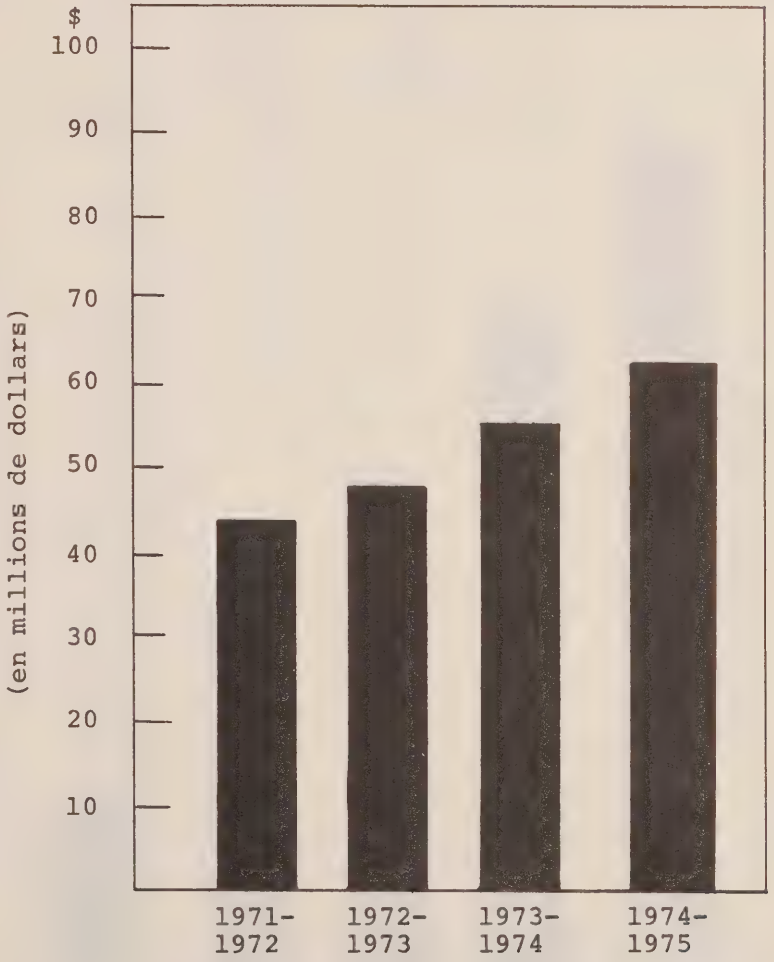


DIAGRAMME 5 - COÛTS DES SERVICES DE BIEN-ÊTRE À L'ENFANCE - CONTRIBUTION FÉDÉRALE

Foyers de soins spéciaux

En 1974-1975, l'augmentation des contributions du gouvernement fédéral versées pour supporter le coût des soins fournis dans un foyer de soins spéciaux a été causée par la tendance continue dans plusieurs provinces à convertir des établissements pour déficients mentaux, tels les hôpitaux-écoles et les hôpitaux pour malades mentaux, en établissements de bien-être. Ce fait les rend admissibles au partage des frais en vertu de l'Accord sur le Régime d'assistance publique du Canada.

En outre, la plupart des provinces accusent une hausse générale du coût de la prestation des soins en établissement qui se traduit par une augmentation du coût de l'assistance offerte aux personnes dans le besoin.

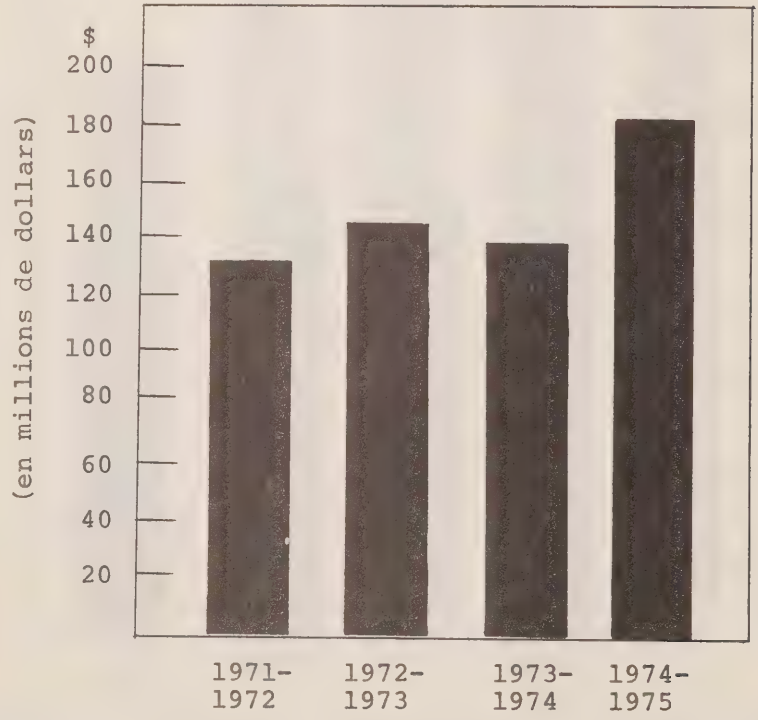


DIAGRAMME 4 - COÛTS DES FOYERS DE SOINS SPÉCIAUX - CONTRIBUTION FÉDÉRALE

Assistance générale

En 1974-1975, la hausse des coûts de l'assistance générale a été causée par l'augmentation du nombre de bénéficiaires et l'accroissement relativement considérable ($147 millions par rapport à $26 millions en 1973-1974) de la part fédérale des frais d'assistance. Cette hausse est en outre attribuable à des taux provinciaux d'assistance plus élevés et à l'augmentation du coût de la vie.

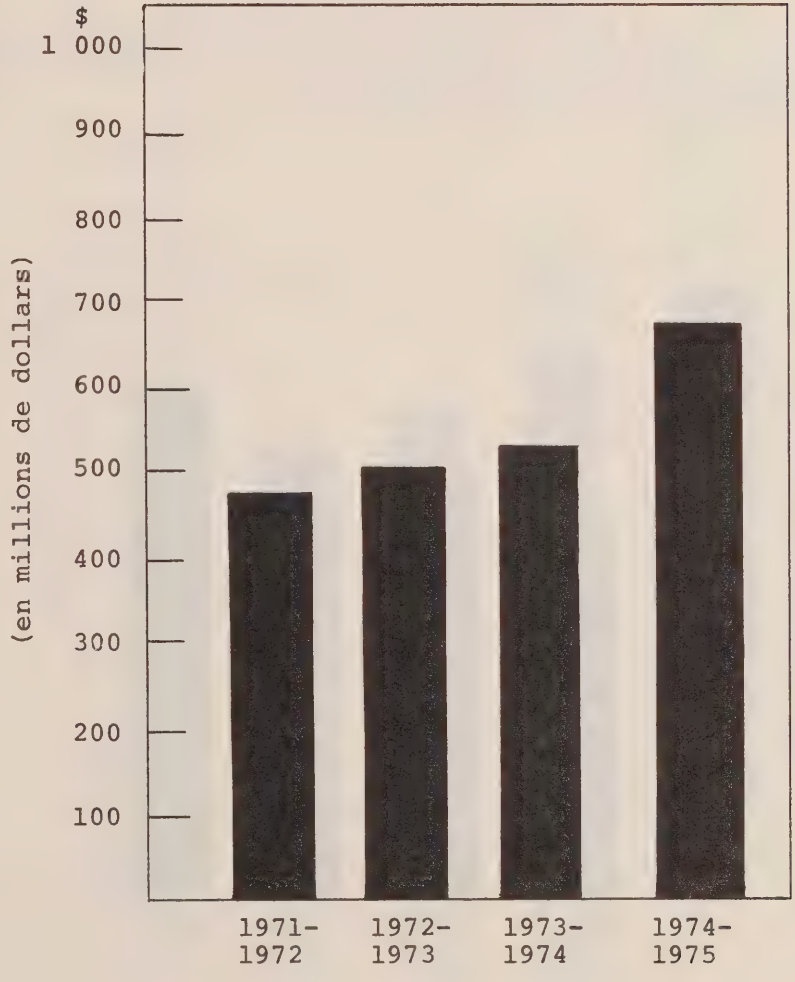


DIAGRAMME 3 - COÛTS DE L'ASSISTANCE GÉNÉRALE
- CONTRIBUTION FÉDÉRALE

Paiements du gouvernement fédéral aux provinces

Les paiements effectués par le gouvernement fédéral aux provinces ont augmenté de 28,0 pour cent par rapport à 1973-1974 en raison de la hausse des coûts des programmes de bien-être social causée principalement par l'augmentation des échelles de taux et du nombre de bénéficiaires.

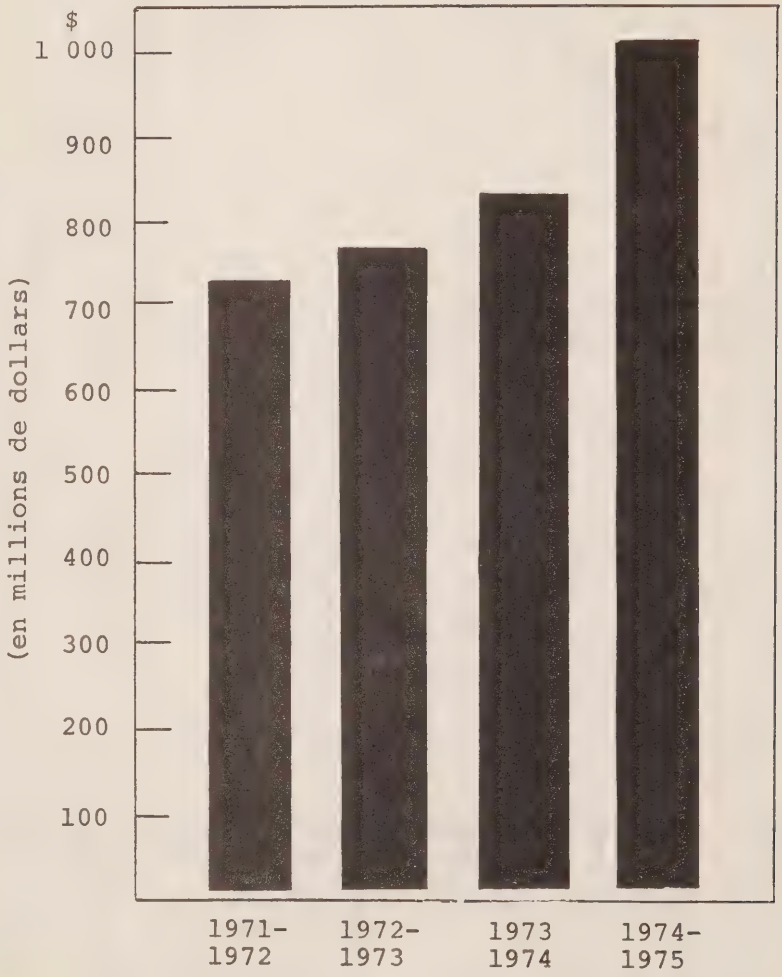


DIAGRAMME 2 - ENSEMBLE DES PAIEMENTS FÉDÉRAUX EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA y compris les montants versés au Québec en vertu de la Loi sur les programmes établis (Arrangements provisoires).

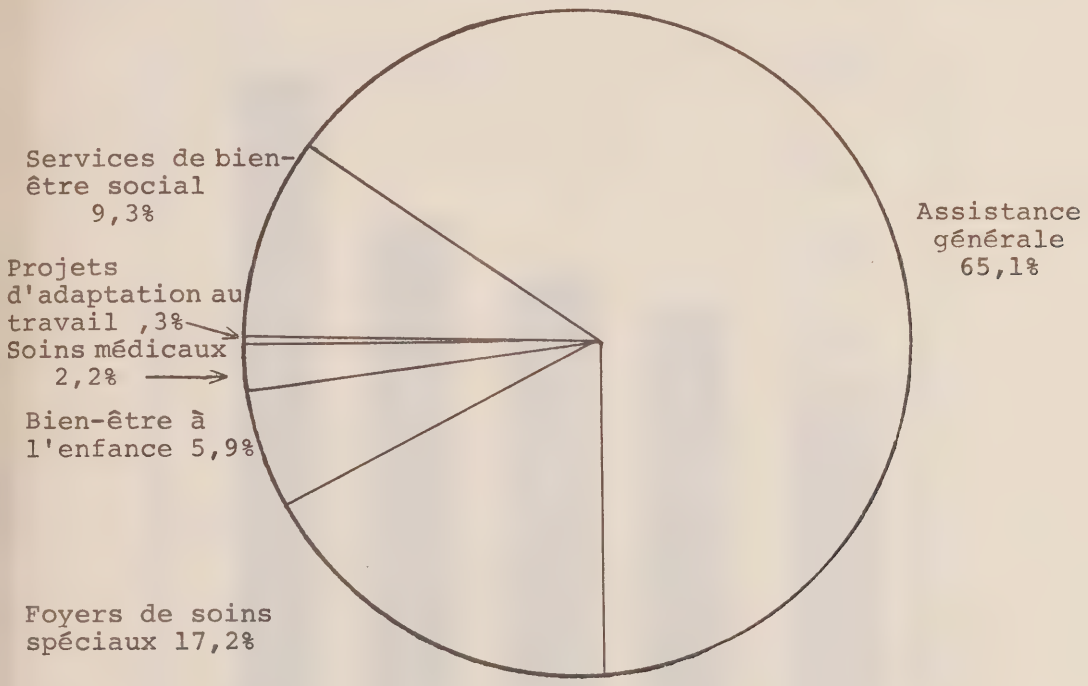


DIAGRAMME 1 - RÉPARTITION DES DÉPENSES PARTAGÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
ANNÉE FINANCIÈRE 1974-1975

TABLEAU 3

NOMBRE DE PERSONNES ASSISTÉES EN VERTU DU RÉGIME D'ASSISTANNCE PUBLIQUE DU CANADA AU 31 MARS 1975

PROVINCE	Services à l'enfance	Assistés sociaux*	Adultes dans les foyers de soins spéciaux	TOTAL
Terre-Neuve	3 299	63 127	1 789	68 215
Île-du-Prince-Edouard	621	8 401	1 120	10 142
Nouvelle-Écosse	2 839	52 358	3 431	58 628
Nouveau-Brunswick	2 920	55 604	2 983	61 507
Québec	33 042	416 558	11 321	460 921
Ontario	14 779	336 415	33 251	384 445
Manitoba	4 326	56 616	1 086	62 028
Saskatchewan	2 927	45 332	4 978	53 237
Alberta	10 884	77 970	3 414	92 268
Colombie-Britannique	9 700	162 349	6 859	178 908
Territoire du Nord-Ouest	n/a	5 711	n/a	5 711
TOTAL	85 337	1 280 441	70 232	1 436 010

* Y compris personnes à charge
Les statistiques pour le Yukon ne sont pas disponibles

TABLEAU 2

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNÉE FINANCIÈRE 1973-1974

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	16 763	4 155	1 018	1 066	1 667	-	24 669
Ile-du-Prince-Edouard	1 934	2 347	259	55	539	-	5 134
Nouvelle-Ecosse	17 804	4 975	1 859	295	2 785	-	27 718
Nouveau-Brunswick	21 328	2 090	934	1 069	4 030	650	30 101
Québec*	184 454	90 280	22 225	-	21 541	-	318 500
Ontario	155 621	9 642	14 884	1 302	25 631	192	207 272
Manitoba	21 366	6 786	3 115	1 588	4 217	822	37 894
Saskatchewan	23 848	5 666	1 353	1 783	2 621	83	35 354
Alberta	38 502	2 994	4 136	198	6 332	494	52 656
Colombie-Britannique	57 621	8 918	6 049	3 341	7 371	41	83 341
Territoires du Nord-Ouest**	237	550	154	-	409	-	1 350
Territoire du Yukon	215	197	214	3	157	-	786
TOTAL	539 693	138 600	56 200	10 700	77 300	2 282	824 775

* Montants versés au Québec par le ministère des Finances (Évaluations) en vertu de la Loi sur les programmes établis (Arrangements provisoires).

** Quoique les Territoires du Nord-Ouest aient signé, en février 1973, une entente avec le gouvernement fédéral en vertu de la Partie I du Régime d'assistance publique du Canada, aucune demande de partage de frais n'a été faite avant l'année financière 1973-1974.

TABLEAU 1

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA
PAR PROGRAMME, ANNÉE FINANCIÈRE 1974-1975

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	22 923	5 250	1 136	2 233	1 679	-	33 221
Île-du-Prince-Édouard	2 861	3 173	226	65	688	-	7 013
Nouvelle-Écosse	19 899	5 967	1 607	336	3 373	7	31 189
Nouveau-Brunswick	27 822	1 329	943	1 127	3 415	588	35 224
Québec	213 913*	119 653*	22 310*	11 100*	28 350*	714	396 040
Ontario	205 853	14 846	15 704	1 489	33 260	282	271 434
Manitoba	23 262	4 801	4 397	1 541	4 736	1 089	39 826
Saskatchewan	21 053	6 896	1 984	1 654	3 114	-	34 701
Alberta	44 428	4 115	5 376	5	6 796	49	60 769
Colombie-Britannique	101 939	14 429	8 324	3 173	11 624	332	139 821
Territoires du Nord-Ouest	3 231	1 324	218	72	1 246	-	6 091
Territoire du Yukon	241	266	6	-	227	-	740
TOTAL	687 425	182 049	62 231	22 795	98 508	3 061	1 056 069

* Montants versés au Québec par le ministère des Finances (Evaluations) en vertu de la Loi sur les programmes établis (Arrangements provisoires).

IV. TABLEAUX ET DIAGRAMMES

du Bien-être social et des Affaires sociales qui a été saisi de la question en vue d'une étude par la Chambre des communes.

Le directeur des services de bien-être social et l'expert-conseil des services de développement communautaire ont participé à l'étude entreprise par le Groupe d'étude fédéral-provincial sur les jeunes qui ont des démêlés avec la justice. Ce groupe, formé de représentants du ministère du Solliciteur général, des services correctionnels et de bien-être à l'enfance de chaque province et territoire, a étudié les programmes, les services, les arrangements financiers et la législation ayant trait à la délinquance juvénile. Le rapport final de l'Étude fédérale-provinciale sur les jeunes qui ont des démêlés avec la justice a été publié en août 1974. De même, un représentant du Régime d'assistance publique du Canada siège au Comité du Solliciteur général chargé de proposer une nouvelle législation en vue de remplacer la Loi sur les jeunes délinquants.

III. AUTRES ACTIVITÉS

En vertu de la Loi Nº 4 de 1974 portant affectation de crédits, deux nouvelles ententes fédérales-provinciales ont été conclues pendant l'année.

Des accords sur la prestation de soins dans les maisons de convalescence ont été signés avec l'Ontario, le Manitoba et l'Alberta afin de remplacer les revenus du Régime d'assistance publique du Canada auxquels ces provinces avaient renoncé lorsqu'elles ont instauré des programmes universels de soins en maison de convalescence. Le gouvernement fédéral a donc versé $45,6 millions à ces trois provinces au cours de l'année se terminant le 31 mars 1975. Les accords, qui sont en vigueur jusqu'au 31 mars 1976, peuvent être renouvelés chaque année par la suite.

Des accords ont été conclus avec les provinces de l'Ontario et du Nouveau-Brunswick, par lesquels le gouvernement fédéral défraie une partie du coût des services fournis aux jeunes délinquants placés sous l'autorité correctionnelle provinciale. Les services dont les frais sont partagés sont essentiellement les mêmes que ceux assurés dans d'autres provinces par les autorités du bien-être à l'enfance et dont les frais sont également partageables aux termes du Régime d'assistance publique du Canada. Grâce à cette mesure législative spéciale, environ $12 millions ont été versés à l'Ontario et au Nouveau-Brunswick au cours de 1974-1975 en vue de défrayer le coût des services fournis aux jeunes délinquants. Ces accords demeureront en vigueur jusqu'au 31 mars 1976, avec possibilité de renouvellement annuel par la suite.

La Direction a participé à diverses activités ministérielles et interministérielles au cours de l'année.

L'expert-conseil en matière de services de bien-être à l'enfance et à la jeunesse a siégé à un Comité interministériel sur l'adoption internationale, en même temps que des représentants des ministères de la Main-d'oeuvre et de l'Immigration, des Affaires extérieures, de la Justice et du Secrétariat d'État (Direction générale de la citoyenneté). Le Comité a pour fonction principale de mettre au point des mécanismes permettant d'expliquer les lois canadiennes sur l'adoption aux pays étrangers et de fournir des renseignements sur les procédures et les conditions relatives à l'immigration aux autorités provinciales canadiennes et aux parents adoptifs éventuels.

Avec la collaboration d'autres directions générales du Ministère, de la documentation sur les enfants maltraités a été préparée à l'intention du Comité permanent de la Santé,

projets qui ont reçu l'appui du gouvernement fédéral en 1974-1975 ont permis à 2 212 personnes qui éprouvaient de la difficulté à obtenir ou à conserver un emploi, d'améliorer leur motivation ou leur aptitude au travail en participant à des programmes conçus pour les préparer à reprendre un emploi ou à poursuivre leur formation professionnelle.

En 1974-1975, on s'est surtout efforcé de préciser les objectifs des projets avec les provinces et d'assurer une coordination interministérielle dans le domaine de l'adaptation au travail. Des travaux préliminaires ont également été entrepris avec la Direction générale de la recherche sur la politique et de la planification à long terme sur l'évaluation des projets d'adaptation au travail mis sur pied dans tout le pays.

bénéficiaires d'assistance financière ou en rapport avec des services de bien-être à l'enfance. L'étude a cependant démontré qu'on tendait à offrir des services à un plus grand nombre d'usagers notamment à de petits salariés. À la suite de ces constatations et étant donné l'appui plus important assuré par les provinces aux organismes communautaires, le besoin s'est fait sentir de procéder à un examen minutieux des demandes de partage des frais pour déterminer si la nature des services et la clientèle qui en bénéficierait répondent aux critères du Régime d'assistance publique du Canada. De plus, nous constatons une augmentation de plus 700 pour cent du nombre de demandes provinciales pour inscrire des organismes de bien-être social aux annexes du Régime.

Des services de consultation ont également été fournis à deux provinces relativement à la mise au point de politiques et de programmes de services d'auxiliaires familiales.

v) Recherche, projets de démonstration et distribution des services sociaux - Des fonctionnaires de la Division et de la Direction des opérations et des finances ont participé à l'élaboration d'une proposition provinciale en vue d'établir un système d'information général pour un ministère des services sociaux. On a fait l'appréciation des méthodes d'évaluation pour les projets de recherche, et étudier un certain nombre de propositions au sujet de crédits affectés à la recherche et aux projets de démonstration sous l'empire du Régime d'assistance publique du Canada. On a également poursuivi, sur place, des études de systèmes de distribution de services sociaux.

3) Adaptation au travail

Au cours de l'année, dix nouveaux projets d'adaptation au travail ont été approuvés en vertu de la disposition du Régime d'assistance publique du Canada. Les 56

d'intégrer ces personnes à la société. Le besoin de services de réadaptation sociale et professionnelle croissant toujours, une étude des programmes provinciaux a été entreprise au moyen de visites et de consultations.

ii) Services de bien-être à l'enfance et à la jeunesse - En décembre 1974, le Ministre a annoncé la création d'un Bureau d'adoption pour faciliter les adoptions interprovinciales et établir une procédure pour le placement des enfants venant de l'étranger. Un agent de programme a été engagé à plein temps pour élaborer les procédures du Bureau d'adoption.

Comme dans le passé, l'expert-conseil en matière de bien-être à l'enfance du Régime d'assistance publique du Canada a participé, en qualité de secrétaire, à la réunion des représentants provinciaux et territoriaux du bien-être à l'enfance.

iii) Services de garde de jour - Depuis l'introduction des "Critères pour les services de garde de jour aux termes du Régime d'assistance publique du Canada" en mars 1974, plusieurs programmes provinciaux de services de garde de jour ont été approuvés aux fins du partage des frais. Comme le fait valoir la brochure intitulée "Situation de la garde de jour au Canada (1974)", publiée par le Centre national d'information sur la garde de jour, les secteurs privé et public s'intéressent de plus en plus à ce sujet. Par conséquent, il y a une demande accrue de consultations relativement aux services de garde de jour.

iv) Autres services de bien-être social - Une étude de la politique et des pratiques provinciales quant aux critères de réclamation du coût des services de bien-être social aux termes du Régime d'assistance publique du Canada a été complétée. Cette étude a révélé que la plupart des services pour lesquels on demandait un remboursement étaient fournis à des

II. CONSULTATION RELATIVE AUX PROGRAMMES PROVINCIAUX

Les bureaux régionaux situés dans neuf capitales provinciales ont pour principales fonctions de déterminer l'admissibilité au partage des frais provinciaux en matière de bien-être, d'examiner les demandes des provinces relatives aux divers programmes administrés par la Direction générale et d'offrir de la consultation sur l'admissibilité au partage des coûts des nouveaux programmes provinciaux. Cette dernière fonction est devenue de plus en plus importante, étant donné les nombreuses modifications apportées aux programmes provinciaux.

1) Soutien du revenu

i) Assistance sociale - Au cours de l'année, le travail à été commencé sur la préparation de quatre directives provisoires relatives au partage des frais des programmes d'assistance provinciaux par le gouvernement fédéral en vertu du Régime d'assistance publique du Canada. Ces directives ont trait aux niveaux d'exemption des avoirs liquides, au supplément du revenu pour les petits salariés, aux exemptions liées aux gains et à l'emploi ainsi qu'aux allocations spéciales accordées en raison d'âge ou d'invalidité.

ii) Foyers de soins spéciaux - Le nombre de visites pour fins d'étude sur place d'établissements de bien-être social a augmenté puisque les provinces ont soumis beaucoup plus de demandes d'inscription de foyers de soins spéciaux aux annexes du Régime. Les provinces ont également continué de modifier la vocation des hôpitaux pour malades mentaux et des hôpitaux-écoles en établissements de bien-être social, les rendant de ce fait admissibles au partage des frais en vertu du Régime d'assistance publique du Canada.

2) Services de bien-être social

i) Services de réadaptation - Dans le cas des déficients mentaux, on s'attache maintenant beaucoup plus à la prestation de services communautaires qu'aux programmes de soins en établissement, afin

I. INTRODUCTION

Le Régime d'assistance publique du Canada est le véhicule par lequel le gouvernement fédéral partage 50 pour cent des frais encourus par les provinces et les municipalités afin d'accorder l'assistance sociale aux personnes dans le besoin. Le Régime prévoit aussi une quote-part fédérale de 50 pour cent de certains frais de services de bien-être social offerts aux personnes dans le besoin ou susceptibles de le devenir si elles ne reçoivent pas ces services. En vertu dudit Régime, le gouvernement fédéral partage les coûts des soins dispensés aux personnes dans le besoin qui résident dans les établissements de bien-être social reconnus, tels les foyers d'hébergement pour vieillards, les maisons de convalescence, les institutions de soins pour enfants, ainsi que les établissements pour enfants et adultes physiquement ou mentalement handicapés. Le Régime s'étend également aux frais d'entretien des enfants confiés aux autorités provinciales de bien-être à l'enfance. En vertu du Régime d'assistance publique du Canada, le gouvernement fédéral paie aussi la moitié du coût des projets d'adaptation au travail conçus pour améliorer la capacité de travail des personnes qui éprouvent des difficultés exceptionnelles à obtenir ou à conserver un emploi, ou à entreprendre une formation professionnelle.

Le Régime a pour objectifs principaux:

- d'assister les provinces dans le développement de programmes adéquats ayant pour but d'aider toute personne dans le besoin quelle qu'en soit la cause;

- d'encourager les mesures visant à maintenir des taux d'assistance permettant aux bénéficiaires de garder un niveau de vie raisonnable;

- d'appuyer la mise en place et le dévelopement des services de bien-être social qui peuvent contribuer à prévenir et à éliminer les causes et les effets de la pauvreté, de la négligence à l'égard des enfants et de la dépendance de l'assistance publique;

- de favoriser la prestation de soins convenables aux personnes nécessiteuses qui résident dans les foyers de soins spéciaux.

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7) Diagramme 4 - Coûts des foyers de soins spéciaux - contribution fédérale 17

8) Diagramme 5 - Coûts des services de bien-être à l'enfance - contribution fédérale 18

9) Diagramme 6 - Coûts des soins médicaux pour personnes nécessiteuses - contribution fédérale 19

10) Diagramme 7 - Coûts des services de bien-être social - contribution fédérale 20

11) Diagramme 8 - Coûts des projets d'adaptation au travail - contribution fédérale 21

L'honorable Marc Lalonde
Ministre de la Santé nationale et du Bien-être social

Monsieur le Ministre,

Conformément aux dispositions de l'Article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1975.

Je vous prie d'agréer, Monsieur le Ministre, l'assurance de mes sentiments dévoués.

Le Sous-ministre du Bien-être social,

Bruce Rawson

Son Excellence l'honorable Jules Léger,
Gouverneur général et Commandant en chef du Canada.

QU'IL PLAISE À VOTRE EXCELLENCE,

J'ai l'honneur de présenter à Votre Excellence le Rapport annuel sur l'application du Régime d'assistance publique du Canada pour l'année financière terminée le 31 mars 1975.

Je vous prie d'agréer, Monsieur le Gouverneur général, l'assurance de mon profond respect.

Le Ministre de la Santé
nationale et du Bien-être
social,

Marc Lalonde

Régime d'assistance publique du Canada

Rapport annuel

1974-1975

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Health and Welfare Canada

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Canada Assistance Plan

Annual Report

1975-76

His Excellency the Right Honourable Jules Léger
Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to Your Excellency the Annual Report on the Administration of the Canada Assistance Plan for the fiscal year ended March 31, 1976.

Respectfully submitted,

Monique Bégin
Minister of National Health
and Welfare

The Honourable Monique Bégin
Minister of National Health and Welfare

Madam:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1976.

Respectfully submitted,

Bruce Rawson
Deputy Minister of National Health and Welfare

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I. INTRODUCTION

The Canada Assistance Plan is a shared cost program through which the federal government pays 50 percent of the cost to the provinces and municipalities of providing social assistance to persons who are in need and 50 percent of certain costs of providing welfare services to persons who are in need or likely to become in need if they do not receive such services. The Plan provides for federal sharing in the cost of care for persons in need who reside in recognized welfare institutions such as homes for the aged, nursing homes, child care institutions, and institutions for physically and mentally handicapped children and adults. The costs of maintenance of children who are in the care of child welfare authorities are also covered by the Plan. Through the Canada Assistance Plan the federal government also shares on a 50-50 basis in the costs of work activity projets which are designed to improve the employability of persons who have unusual difficulty in finding or retaining jobs or in undertaking job training.

The major objectives of the Plan are:

- to assist the provinces in developing a comprehensive assistance program for all persons who are in need for whatever cause;

- to encourage the provision of adequate levels of assistance which would permit recipients to maintain a decent standard of living;

- to support the development and extension of welfare services which would help prevent and remove the causes and effects of poverty, child neglect and dependence on public assistance;

- to promote the provision of adequate levels of institutional care for those who require it.

Administrative Reorganization

Some administrative reorganization took place within the Canada Assistance Plan during the year. The Welfare Services Division joined with the Vocational Rehabilitation of Disabled Persons and Work Activity Sections to form the Rehabilitation and Welfare Services Administration Division.

II. MAJOR ACTIVITIES

1) Assistance Administration

i) Social Assistance - The Assistance Administration Division (formerly known as the Income Support Division) continued to administer the assistance provisions of the Canada Assistance Plan relative to federal sharing on behalf of persons in need. Several provinces introduced significant changes in their legislative and administrative procedures during the year involving the Division in a continuous process of consultation, investigation and review.

Interim Guidelines for "Earnings Exemptions", "Liquid Asset Exemptions", "Flat-rate Allowances to the Aged and the Disabled", and "Supplementation of Low-Income Earnings" were developed and introduced during the year.

ii) Homes for Special Care - The provinces continued to submit institutions for listing as homes for special care under the Canada Assistance Plan. On-site reviews were carried out and approximately 20,000 new beds were listed under the Plan. Federal contributions under the Canada Assistance Plan included some $334 million for institutional care.

2) Rehabilitation and Welfare Services Administration

i) Rehabilitation Services - The main trend in the rehabilitation of mentally handicapped persons is towards maintaining individuals in their communities. Services are less institution-based so that the mentally handicapped need not be institutionalized in order to obtain the care and attention they require. Services to assist the families of the retarded to understand and to cope with the problems of retardation are being developed in the individual provinces.

ii) Day Care Services - Several new provincial day care programs were approved for cost-sharing. As indicated in "Status of Day Care in Canada, 1976" the expansion of day care services continued but at a more moderate rate than in recent years.

iii) Other Welfare Services - There is a trend towards expanding services to the elderly and the mentally handicapped in the areas of (a) homemaker and home-aides to encourage independent living in the community and (b) activity centres to meet the special needs of persons at risk of being socially isolated or who require training in life skills with special emphasis being placed on the needs of the mentally retarded and physically disabled.

The trend towards integration of welfare services with other services to people has resulted in the need for closer scrutiny of requests for cost-sharing in order to determine whether the clientele served, as well as the nature of the service, meet the requirements of the Canada Assistance Plan.

3) Work Activity

Under the Work Activity component of the Canada Assistance Plan, eleven new projects and one planning project were approved during the year. The 53 projects that were cost-shared with the provinces in 1975-76 provided opportunities for 2,802 persons in need or likely to become in need who had experienced unusual difficulty in obtaining or holding employment, to improve their motivation and work capacity through participation in programs designed to prepare them for entry or return to employment or for further vocational training.

4) Field Offices

There are field offices in nine provincial capitals. The federal field representative's primary role is to establish the eligibility and shareability of various provincial welfare programs and to insure their compatibility under the various programs administered by the Directorate. (S)He also examines provincial claims and acts as an information resource on the shareability of new program initiatives in the provinces. This latter role, due to his/her expertise in provincial legislation, has become increasingly important because of the numerous changes in provincial programs.

III. OTHER ACTIVITIES

Supplementary Nursing Home Care Benefits

Supplementary Nursing Home Care Benefits agreements were renewed with the Provinces of Ontario, Manitoba, and Alberta for the replacement of the Canada Assistance Plan revenues which were foregone by these provinces when they introduced universal nursing home care programs. As a result the federal government paid $57 million to these provinces during the year ending March 31, 1976. The agreements are effective until March 31, 1977.

Juvenile Correctional Services

In April 1975, the federal government entered into special agreements with the Provinces of Ontario and New Brunswick to allow for federal contributions towards the costs of services provided to young offenders in those provinces. Each agreement covers the two-year period April 1, 1974, to March 31, 1976, and provides for sharing in the costs of care and services provided to young offenders under the jurisdiction of correctional authorities and which would have been eligible for federal contribution under the Canada Assistance Plan if the children were in the care of the Child Welfare Authority of the province.

IV. TABLES AND CHARTS

TABLE 1

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1975-76

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	23,534	7,556	1,451	2,012	2,222	-	36,775
Prince Edward Island	3,434	3,500	234	657	1,171	-	8,996
Nova Scotia	24,079	8,502	2,565	605	5,311	3	41,065
New Brunswick	39,418	3,298	1,069	1,416	4,370	696	50,267
Quebec*	260,392	165,791	22,131	12,229	32,703	-	493,246
Ontario	241,895	66,043	14,179	1,585	53,660	498	377,860
Manitoba	25,585	6,831	5,409	1,559	6,573	1,164	47,121
Saskatchewan	22,012	12,696	2,065	1,454	3,664	118	42,009
Alberta	52,640	18,449	7,197	3	11,497	1,245	91,031
British Columbia	107,901	40,163	5,894	4,378	26,807	244	185,387
Northwest Territories	2,188	1,223	231	17	1,061	-	4,720
Yukon Territory	361	300	7	-	320	-	988
TOTAL	803,439	324,352	62,432	25,915	149,359	3,968	1,379,465

* Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance.

TABLE 2

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1974-75

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	22,923	5,250	1,136	2,233	1,679	-	33,221
Prince Edward Island	2,861	3,173	226	65	688	-	7,013
Nova Scotia	19,899	5,967	1,607	336	3,373	7	31,189
New Brunswick	27,822	1,329	943	1,127	3,415	588	35,224
Quebec	213,913*	119,653*	22,310*	11,100*	28,350*	714	396,040
Ontario	205,853	14,846	15,704	1,489	33,260	282	271,434
Manitoba	23,262	4,801	4,397	1,541	4,736	1,089	39,826
Saskatchewan	21,053	6,896	1,984	1,654	3,114	-	34,701
Alberta	44,428	4,115	5,376	5	6,796	49	60,769
British Columbia	101,939	14,429	8,324	3,173	11,624	332	139,821
Northwest Territories	3,231	1,324	218	72	1,246	-	6,091
Yukon Territory	241	266	6	-	227	-	740
TOTAL	687,425	182,049	62,231	22,795	98,508	3,061	1,056,069

* Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance.

TABLE 3

NUMBER OF PERSONS BEING ASSISTED UNDER THE CANADA ASSISTANCE PLAN
AS AT MARCH 31, 1976

PROVINCE	Child Care	Assistance* Recipients	Adult in Home for Special Care	TOTAL
Newfoundland	4,973	61,009	2,131	68,113
Prince Edward Island	300	8,812	1,135	10,247
Nova Scotia	3,255	54,160	4,277	61,692
New Brunswick	2,976	52,521	3,332	58,829
Quebec	31,500**	428,713**	11,790**	472,003
Ontario	13,731	367,943	42,144	423,818
Manitoba	4,530	57,574	1,222	63,326
Saskatchewan	2,986	43,490	5,125	51,601
Alberta	10,387	78,220	3,946	92,553
British Columbia	10,063	162,076	7,500	179,639
Northwest Territories Yukon	1,025	8,400	162	9,587
TOTAL	85,726	1,322,918	82,764	1,491,408

* Includes dependents.
** Estimates.

Source: Canada Assistance Plan Directorate, Department of National Health and Welfare.

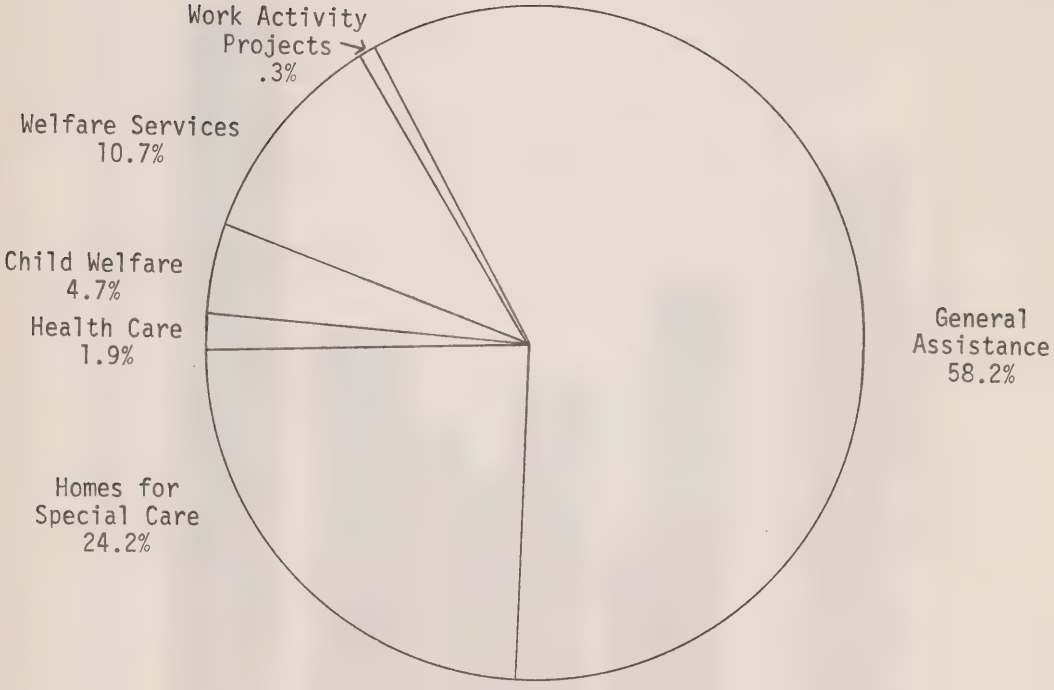


CHART 1 - ALLOCATION OF EXPENDITURES SHARED UNDER THE CANADA ASSISTANCE PLAN FISCAL YEAR 1975-1976

Federal Payments to Provinces

The percentage increase of total federal payments to the provinces over 1974-1975 is 30.6 which generally reflects increased costs of welfare programs mainly due to increased rate structures and clientele serviced.

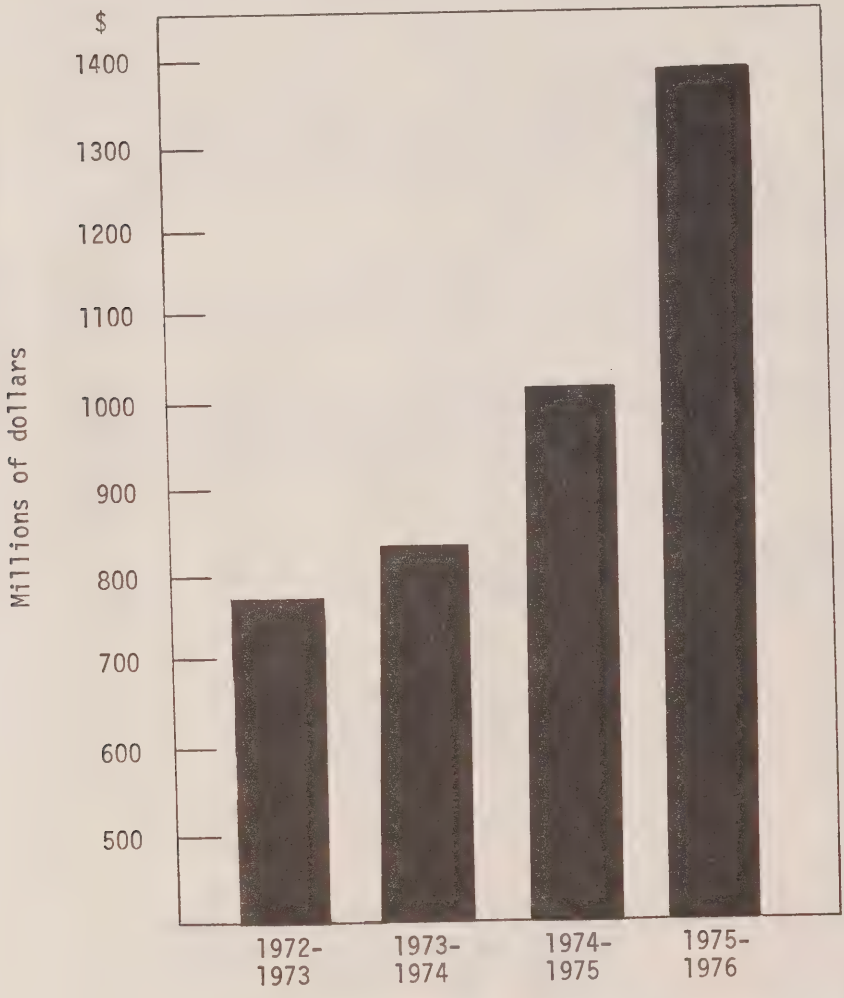


CHART 2 - TOTAL FEDERAL PAYMENTS UNDER THE CANADA ASSISTANCE PLAN including payments to Quebec under the Established Programs (Interim Arrangements) Act

General Assistance

The growth in general assistance costs in 1975-1976 was due to higher provincial assistance rates and the rising cost of living.

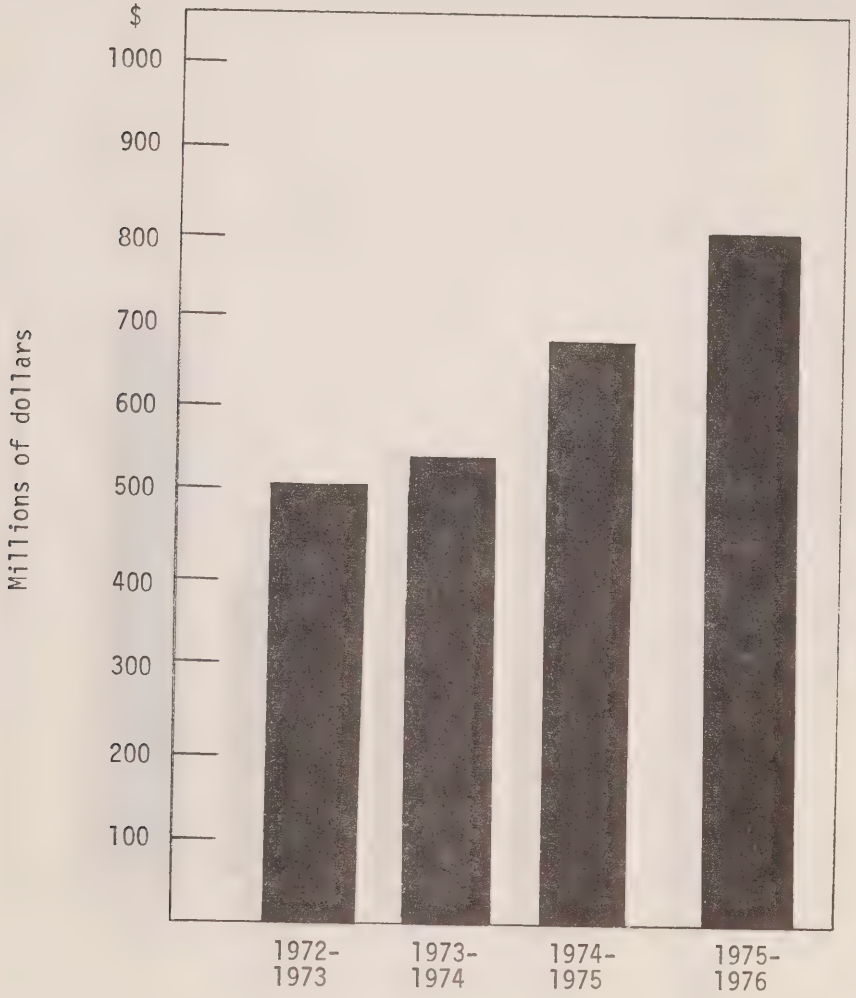


CHART 3 - GENERAL ASSISTANCE
- FEDERAL SHARE OF COSTS

Homes for Special Care

The increase of federal contributions in 1975-1976 towards the costs of care in a home for special care was a result of the continuing trend in several provinces to convert institutions for mentally handicapped persons, such as hospital schools and mental hospitals, to welfare institutions which are eligible for cost-sharing under the Canada Assistance Plan Agreement.

In addition there has been a general increase in the cost of providing institutional care in most provinces which is reflected in a higher cost of assistance to persons in need.

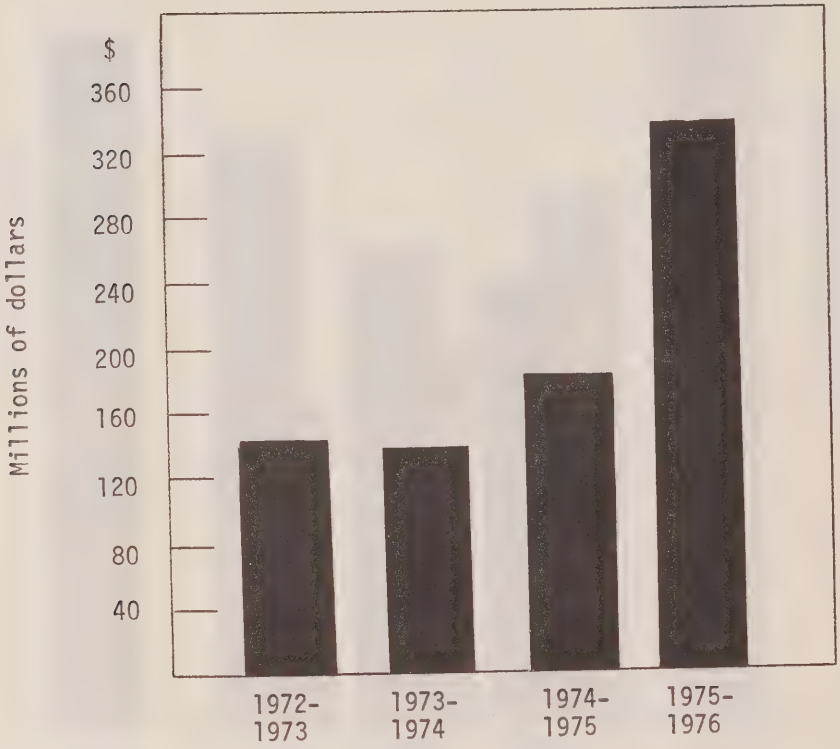


CHART 4 - HOMES FOR SPECIAL CARE
- FEDERAL SHARE OF COSTS

Child Welfare

The general decrease in child care caseloads continued in 1975-1976 but was slightly offset by increased costs attributable largely to higher costs of maintenance, salaries and services.

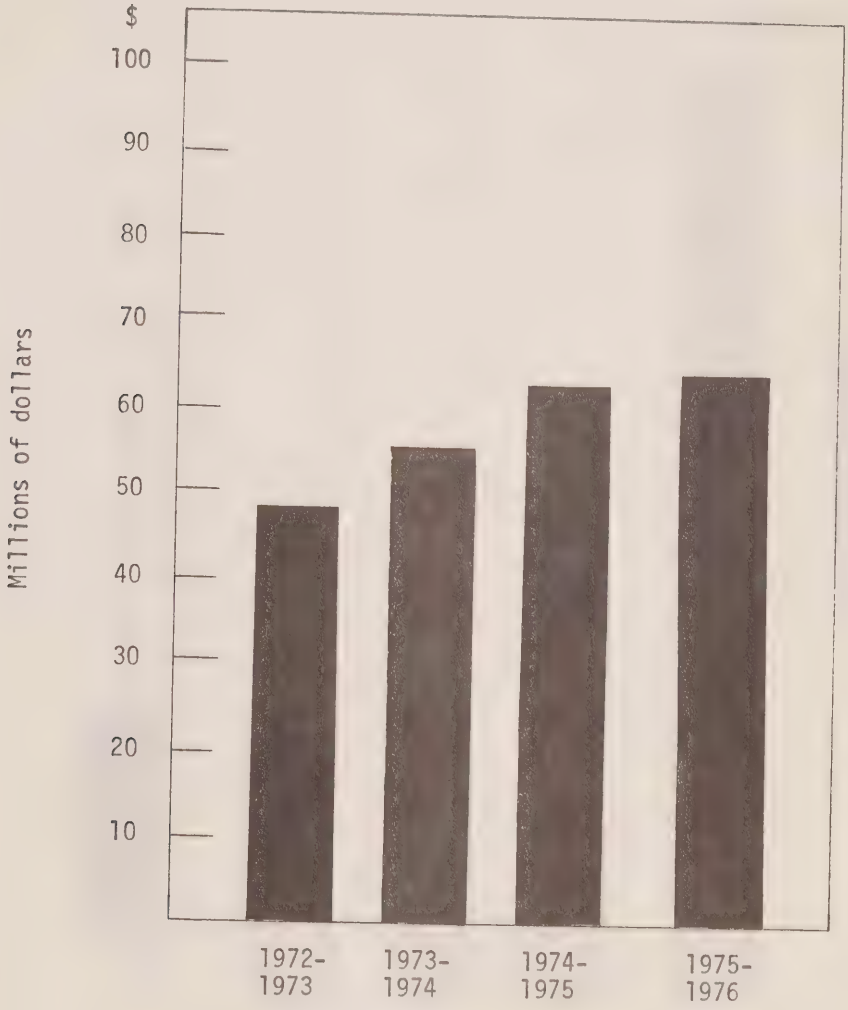


CHART 5 - CHILD WELFARE
- FEDERAL SHARE OF COSTS

Health Care

The increase in the amount of federal payments to provinces towards the costs of health care services in 1975-1976 was a reflection of the general inflationary trend for the period.

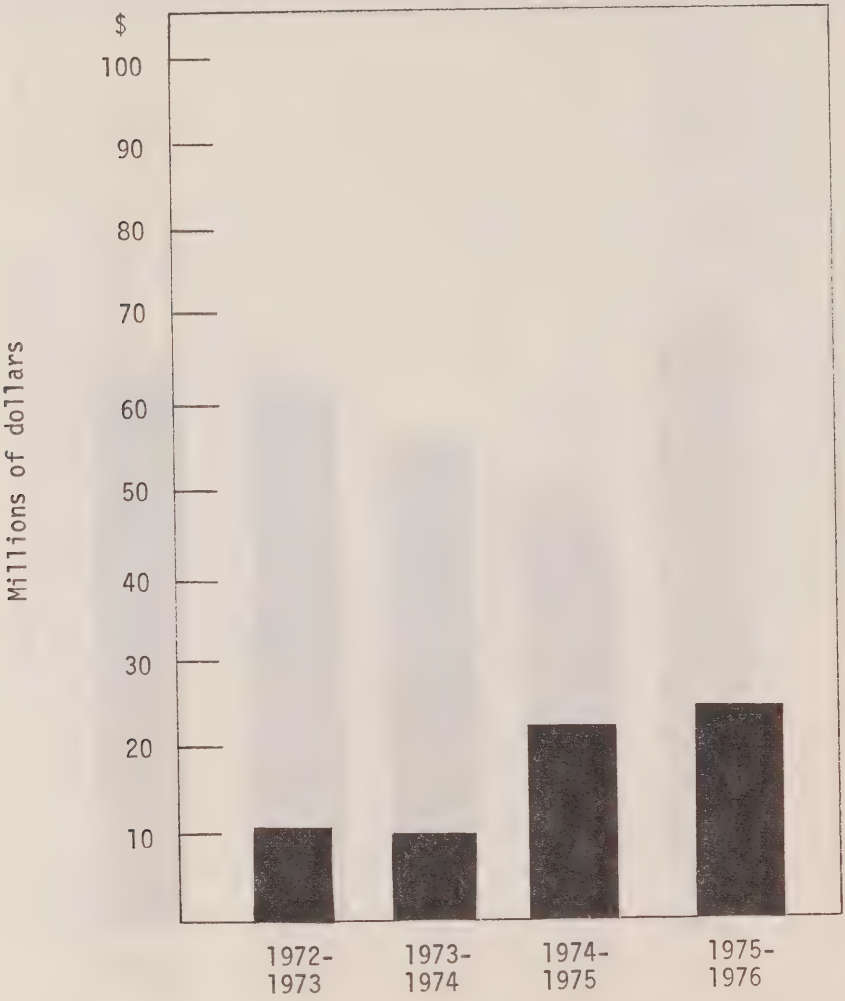


CHART 6 - HEALTH CARE FOR PERSONS IN NEED
- FEDERAL SHARE OF COSTS

Welfare Services

The rapid increase in federal contributions experienced in 1974-1975 continued during 1975-1976. This was the result of a general increase in the cost to the provinces and municipalities of providing welfare services together with the increased emphasis on their part in expanding existing services. The additional spending may be attributed to the development of new services especially the child welfare services, day care services and homemaker services.

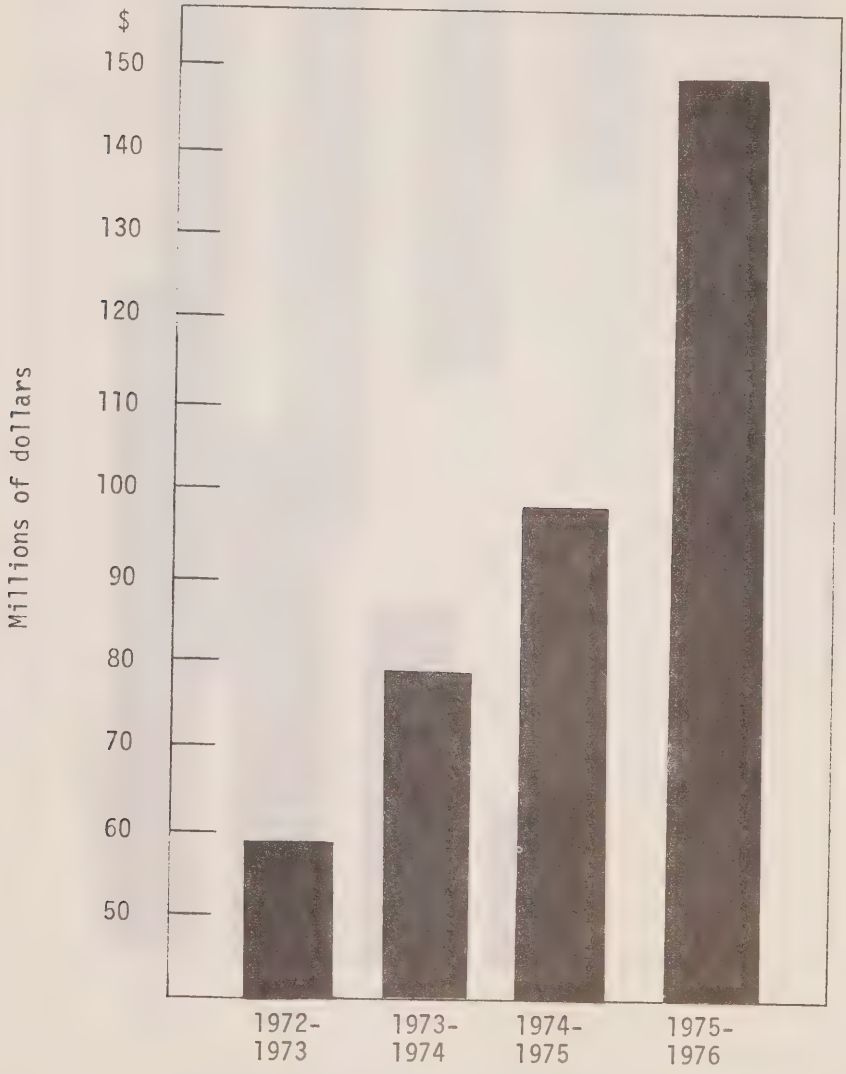


CHART 7 - WELFARE SERVICES
- FEDERAL SHARE OF COSTS

Work Activity

The increase in this area over 1974-1975 was due to an increase in the number of participants served, and the continued development of the social rehabilitation components within projects to better meet the special requirements of more persons in need or likely to become in need who for personal, family and/or environmental reasons were not able to obtain or maintain employment in the labour market.

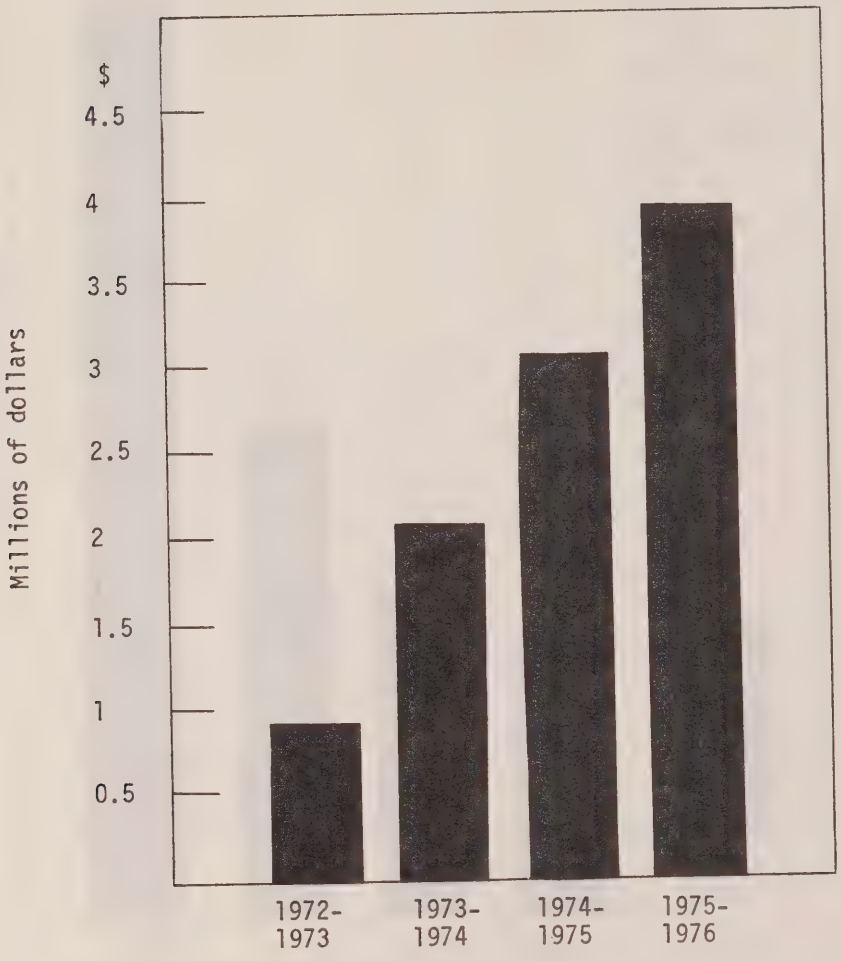


CHART 8 - WORK ACTIVITY PROJECTS
- FEDERAL SHARE OF COSTS

L'adaption au travail

L'augmentation, dans ce domaine, par rapport à 1974-1975, est imputable à l'accroissement du nombre de participants, et au développement continu en matière de réadaptation sociale, dans le cadre de projets visant à mieux satisfaire les besoins spéciaux d'un plus grand nombre de personnes nécessiteuses, ou en voie de le devenir, lesquelles, pour des raisons personnelles, de famille ou de milieu, ne pouvaient trouver ou conserver un emploi.

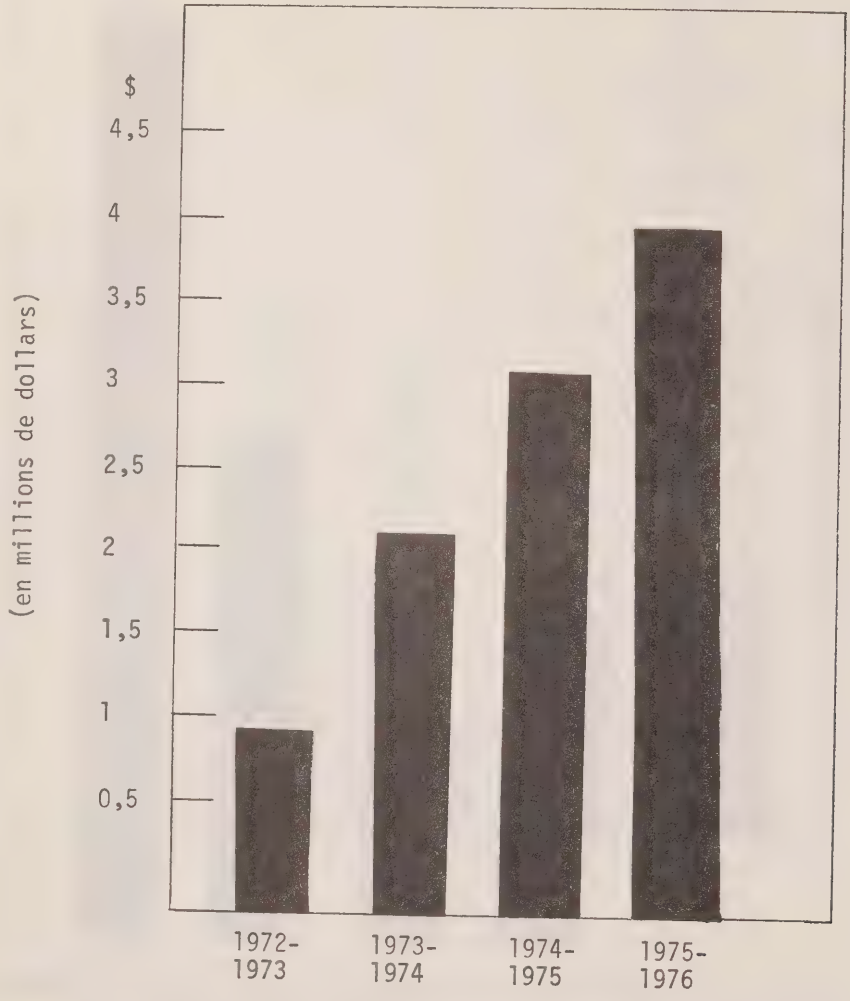


DIAGRAMME 8 - COÛTS DES PROJETS D'ADAPTATION AU TRAVAIL - CONTRIBUTION FÉDÉRALE

Services de bien-être social

L'accroissement accéléré des contributions fédérales, enregistré en 1974-1975, s'est poursuivi en 1975-1976. Cette augmentation a résulté d'une hausse générale des coûts des provinces et des municipalités dans la distribution des services de bien-être, en plus d'une tendance accrue de leur part à élargir la gamme des services offerts. Les dépenses supplémentaires peuvent être attribuées à la mise sur pied de nouveaux services, surtout des services de bien-être à l'enfance, des services de garderies et des services d'auxiliaires familiales.

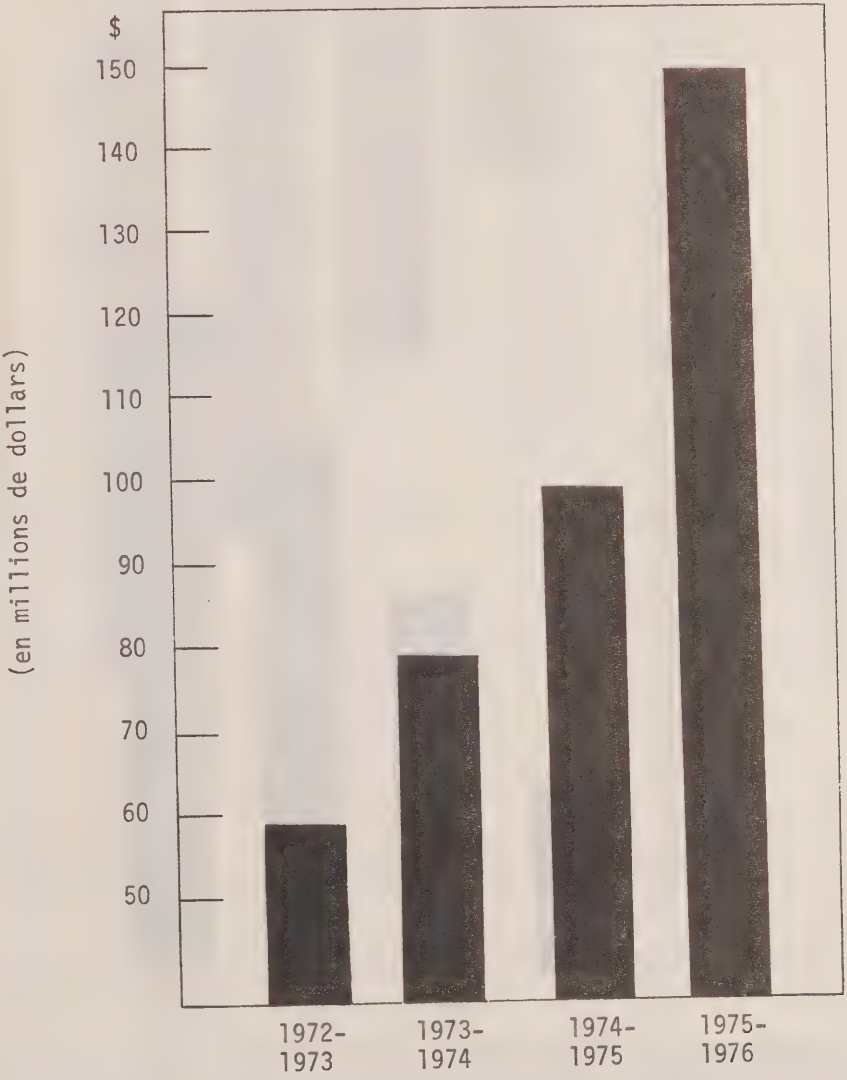


DIAGRAMME 7 - COÛTS DES SERVICES DE BIEN-ÊTRE SOCIAL
- CONTRIBUTION FÉDÉRALE

Soins médicaux

L'augmentation des versements fédéraux aux provinces, pour les coûts des services de soins médicaux en 1975-1976, reflète la tendance inflationniste générale pour la période.

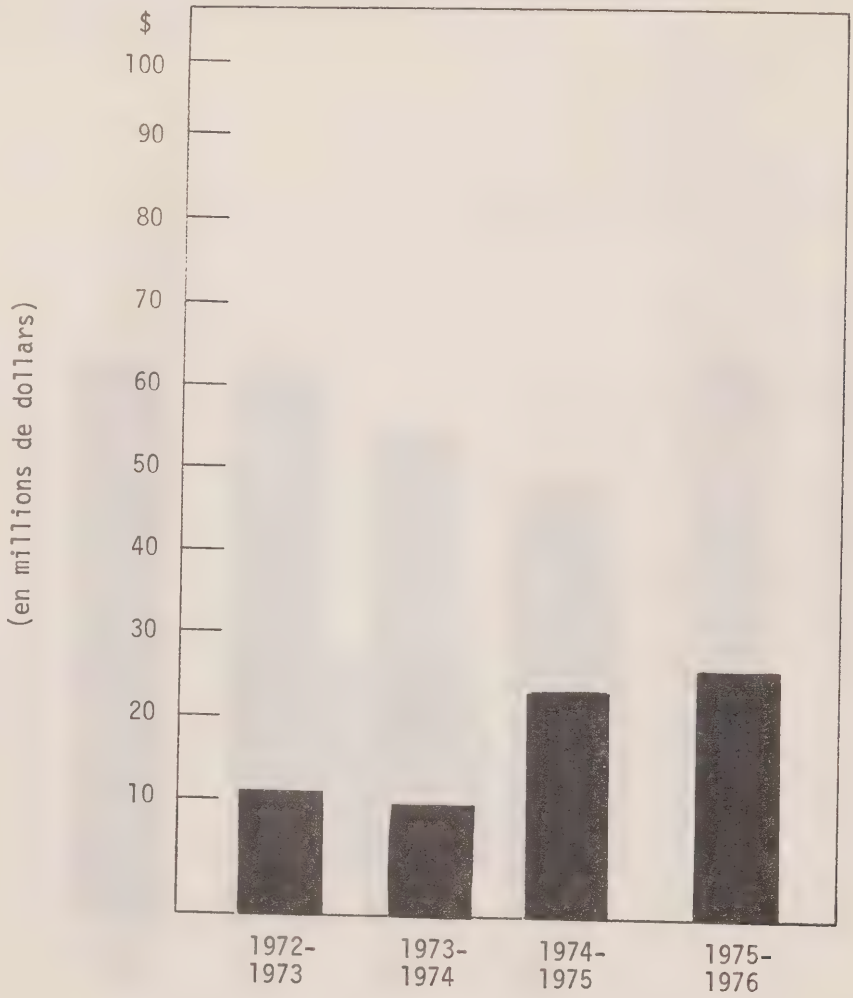


DIAGRAMME 6 - COÛTS DES SOINS MÉDICAUX POUR PERSONNES NÉCESSITEUSES - CONTRIBUTION FÉDÉRALE

Bien-être à l'enfance

La diminution générale du nombre de cas de services de bien-être à l'enfance a continué en 1975-1976, mais elle a été légèrement contre-balancée par une augmentation des coûts, attribuables en grande partie à la hausse des sommes consacrées à l'entretien, aux salaires et aux services.

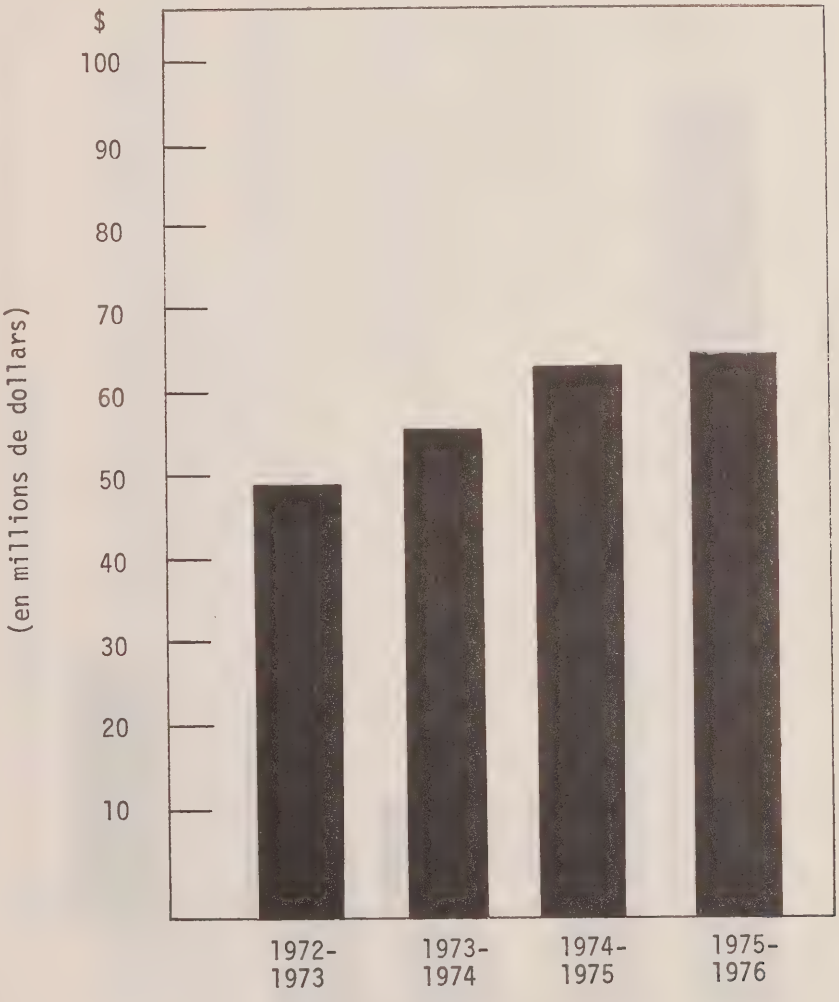


DIAGRAMME 5 - COÛTS DES SERVICES DE BIEN-ÊTRE À L'ENFANCE
- CONTRIBUTION FÉDÉRALE

Foyers de soins spéciaux

L'augmentation de la contribution fédérale, en 1975-1976, au coût des soins dans les foyers de soins spéciaux, résulte de la tendance générale, dans plusieurs provinces, à convertir des établissements pour déficients mentaux, tels que des hôpitaux d'enseignement et des hôpitaux psychiatriques, en établissements de bien-être social qui ont droit au partage des frais en vertu du Régime d'assistance publique du Canada.

De plus, il y a eu augmentation générale du coût des soins en établissement, dans la plupart des provinces, laquelle se traduit par une hausse de coût de l'assistance aux personnes nécessiteuses.

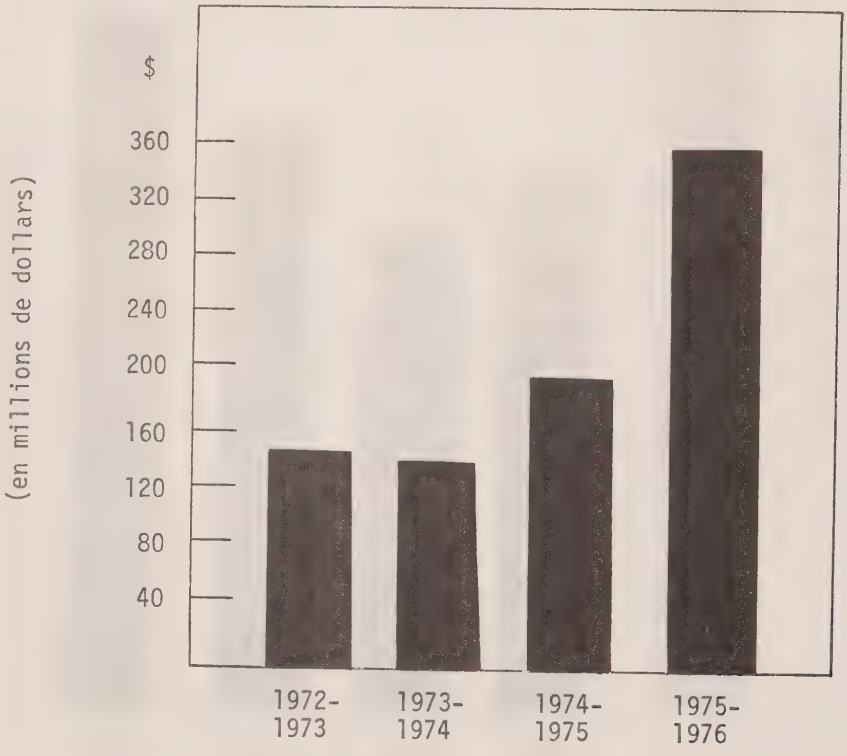


DIAGRAMME 4 - COÛTS DES FOYERS DE SOINS SPÉCIAUX
- CONTRIBUTION FÉDÉRALE

Assistance générale

L'accroissement des frais d'assistance générale, en 1975-1976, a été imputable à la hausse des taux d'assistance provinciale et à l'augmentation du coût de la vie.

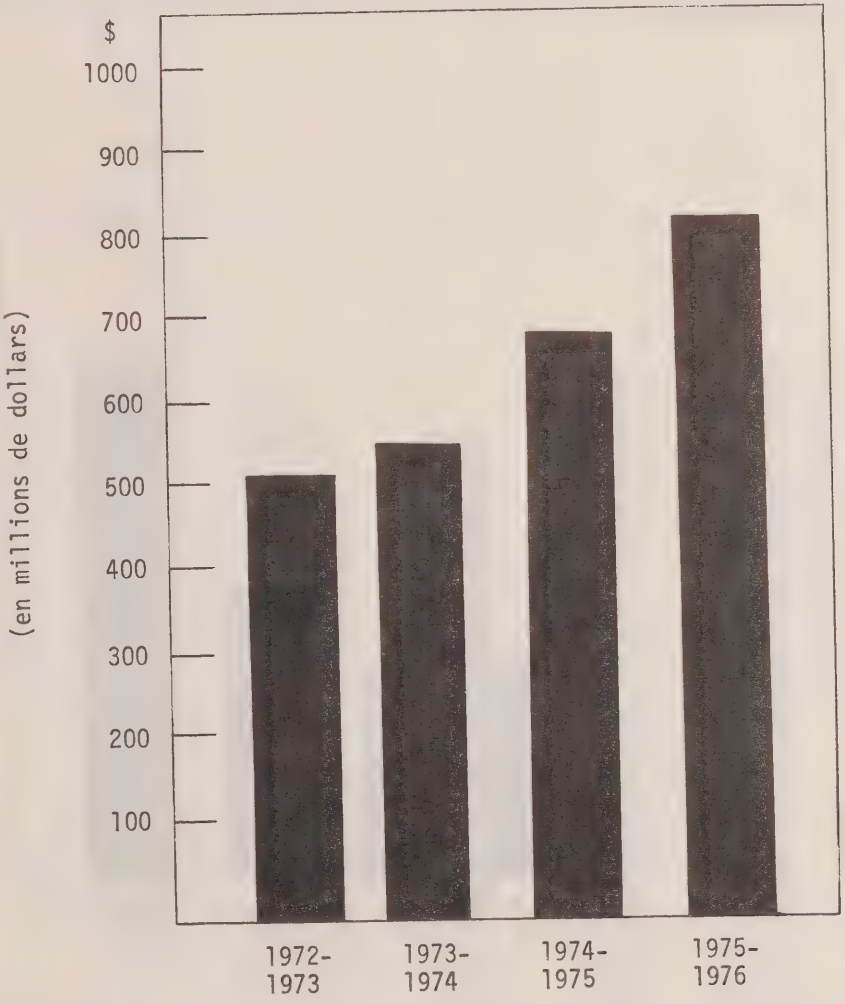


DIAGRAMME 3 - COÛTS DE L'ASSISTANCE GÉNÉRALE
- CONTRIBUTION FÉDÉRALE

Versements du gouvernement fédéral aux provinces

L'augmentation proportionnelle des versements effectués par le gouvernement fédéral aux provinces, en 1974-1975, est de 30,6, et reflète généralement, l'augmentation des coûts des programmes de bien-être social, due principalement à des augmentations des barèmes de taux et de la clientèle servie.

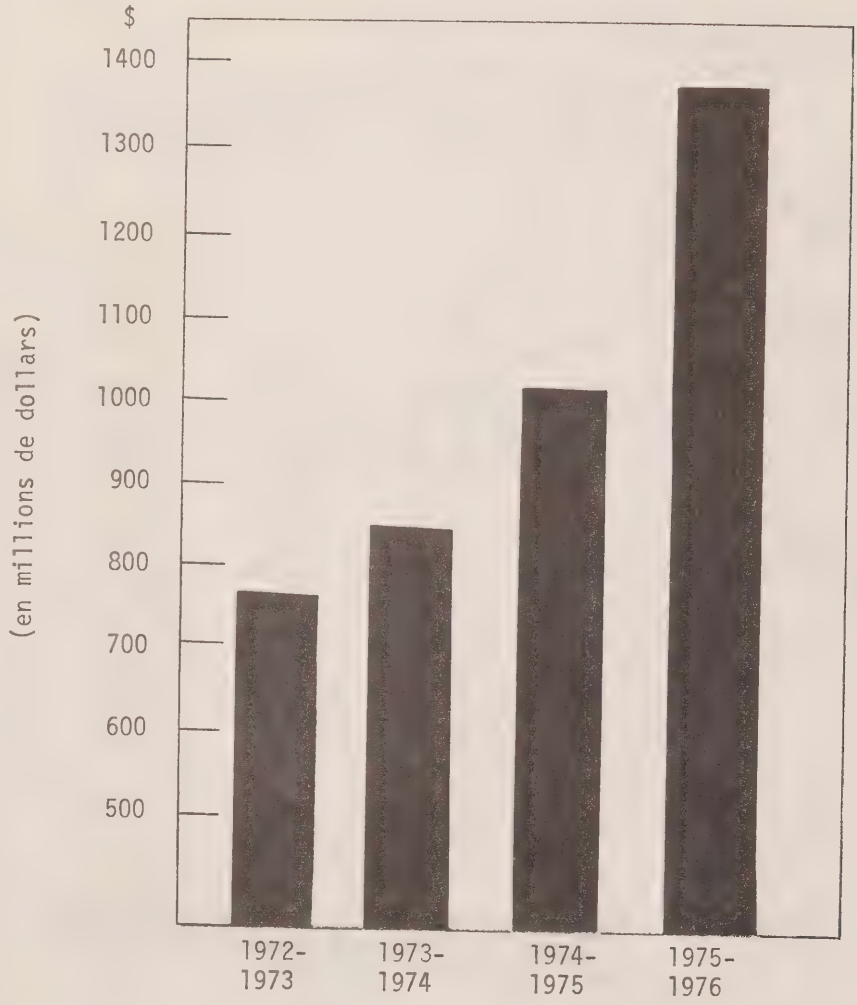


DIAGRAMME 2 - ENSEMBLE DES PAIEMENTS FÉDÉRAUX EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA

y compris les montants versés au Québec en vertu de la Loi sur les programmes établis (Arrangements provisoires)

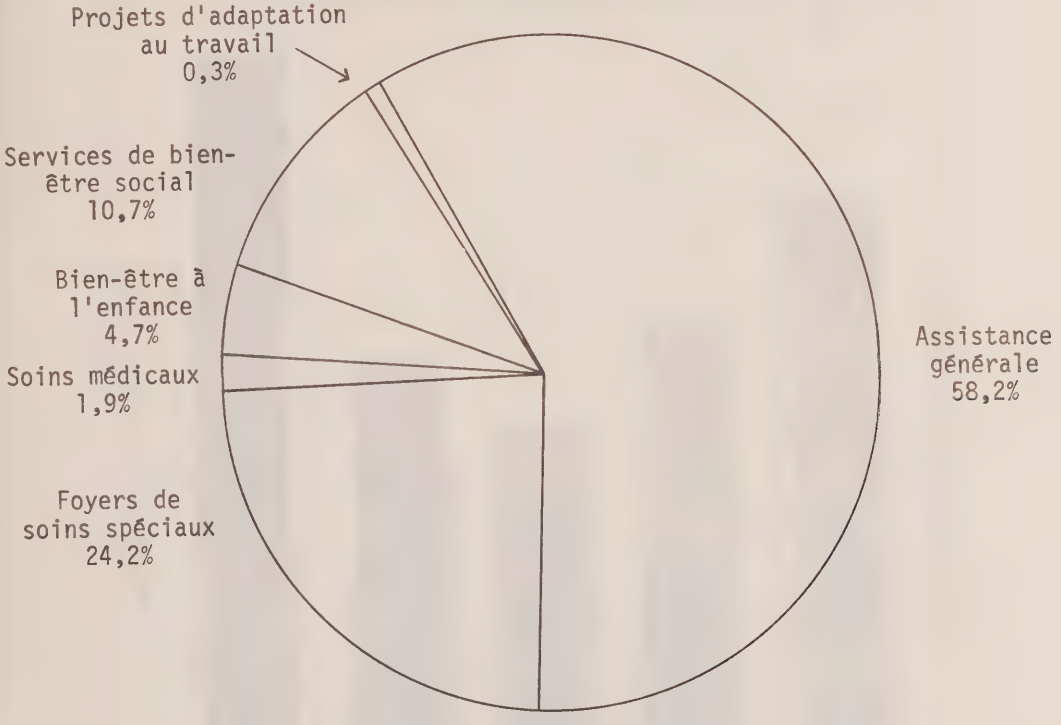


DIAGRAMME 1 - RÉPARTITION DES DÉPENSES PARTAGÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, ANNÉE FINANCIÈRE 1975-1976

TABLEAU 3

NOMBRE DE PERSONNES ASSISTÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, AU 31 MARS 1976

PROVINCE	Service à l'enfance	Assistés sociaux*	Adultes dans les foyers de soins spéciaux	TOTAL
Terre-Neuve	4 973	61 009	2 131	68 113
Île-du-Prince-Édouard	300	8 812	1 135	10 247
Nouvelle-Écosse	3 255	54 160	4 277	61 692
Nouveau-Brunswick	2 976	52 521	3 332	58 829
Québec	31 500**	428 713**	11 790**	472 003
Ontario	13 731	367 943	42 144	423 818
Manitoba	4 530	57 574	1 222	63 326
Saskatchewan	2 986	43 490	5 125	51 601
Alberta	10 387	78 220	3 946	92 553
Colombie-Britannique	10 063	162 076	7 500	179 639
Territoires du Nord-Ouest et Territoire du Yukon	1 025	8 400	162	9 587
TOTAL	85 726	1 322 918	82 764	1 491 408

* Y compris personnes à charge.
** Prévisions.

Source: Direction du Régime d'assistance publique du Canada, Ministère de la Santé nationale et du Bien-être social.

TABLEAU 2

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA PAR PROGRAMME, ANNÉE FINANCIÈRE 1974-1975

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail Partie III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	22 923	5 250	1 136	2 233	1 679	-	33 221
Île-du-Prince-Édouard	2 861	3 173	226	65	688	-	7 013
Nouvelle-Écosse	19 899	5 967	1 607	336	3 373	7	31 189
Nouveau-Brunswick	27 822	1 329	943	1 127	3 415	588	35 224
Québec	213 913*	119 653*	22 310*	11 100*	28 350*	714	396 040
Ontario	205 853	14 846	15 704	1 489	33 260	282	271 434
Manitoba	23 262	4 801	4 397	1 541	4 736	1 089	39 826
Saskatchewan	21 053	6 896	1 984	1 654	3 114	-	34 701
Alberta	44 428	4 115	5 376	5	6 796	49	60 769
Colombie-Britannique	101 939	14 429	8 324	3 173	11 624	332	139 821
Territoires du Nord-Ouest	3 231	1 324	218	72	1 246	-	6 091
Territoire du Yukon	241	266	6	-	227	-	740
TOTAL	687 425	182 049	62 231	22 795	98 508	3 061	1 056 069

* Montants versés au Québec par le ministère des Finances (Évaluations) en vertu de la Loi sur les programmes établis (Arrangements provisoires).

TABLEAU 1

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA PAR PROGRAMME, ANNÉE FINANCIÈRE 1975-1976

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail Partie III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	23 534	7 556	1 451	2 012	2 222	-	36 775
Île-du-Prince-Édouard	3 434	3 500	234	657	1 171	-	8 996
Nouvelle-Écosse	24 079	8 502	2 565	605	5 311	3	41 065
Nouveau-Brunswick	39 418	3 298	1 069	1 416	4 370	696	50 267
Québec*	260 392	165 791	22 131	12 229	32 703	-	493 246
Ontario	241 895	66 043	14 179	1 585	53 660	498	377 860
Manitoba	25 585	6 831	5 409	1 559	6 573	1 164	47 121
Saskatchewan	22 012	12 696	2 065	1 454	3 664	118	42 009
Alberta	52 640	18 449	7 197	3	11 497	1 245	91 031
Colombie-Britannique	107 901	40 163	5 894	4 378	26 807	244	185 387
Territoires du Nord-Ouest	2 188	1 223	231	17	1 061	-	4 720
Territoire du Yukon	361	300	7	-	320	-	988
TOTAL	803 439	324 352	62 432	25 915	149 359	3 968	1 379 465

* Montants versés au Québec par le ministère des Finances, en vertu de la Loi sur les programmes établis (Arrangements provisoires).

IV. TABLEAUX ET DIAGRAMMES

III. AUTRES ACTIVITÉS

Prestations supplémentaires pour soins dans les maisons de repos

Des ententes sur des prestations supplémentaires pour soins dans les maisons de repos ont été renouvelées avec les provinces de l'Ontario, du Manitoba et de l'Alberta, pour remplacer les revenus du Régime d'assistance publique du Canada, qui avaient été prévus par ces provinces lorsqu'elles ont introduit des programmes universels de soins dans les maisons de repos. Le gouvernement fédéral a donc versé 57 millions de dollars à ces provinces, au cours de l'année se terminant le 31 mars 1976. Les ententes sont en vigueur jusqu'au 31 mars 1977.

Services de réadaptation des délinquants juvéniles

En avril 1975, le gouvernement fédéral a conclu des ententes spéciales avec les provinces de l'Ontario et du Nouveau-Brunswick pour autoriser la participation fédérale au financement des services offerts aux délinquants juvéniles dans ces provinces. Chaque entente est en vigueur pour une période de deux ans, s'étendant de 1er avril 1974 au 31 mars 1976, et assure le partage du coût des soins et des services offerts aux délinquants juvéniles, sous la juridiction des autorités de correction et qui auraient eu droit à des contributions fédérales, en vertu du Régime d'assistance publique du Canada, si les enfants avaient été sous la garde des autorités provinciales de bien-être à l'enfance.

iii) Autres services de bien-être social - Il y a une tendance à l'expansion des services offerts aux personnes âgées et aux déficients mentaux dans les domaines: a) des auxiliaires familiales et des aides ménagères pour encourager ces personnes à vivre de façon indépendante dans la communauté et b) des centres d'activités pour satisfaire aux besoins spéciaux de personnes qui risquent d'être socialement isolées ou qui exigent une formation dans le domaine des capacités sociales en mettant l'accent sur les besoins des déficients mentaux et des invalides.

Cette tendance à vouloir intégrer les services de bien-être social aux autres services offerts à la population a entraîné un besoin d'examen plus précis des demandes de partage des coûts, afin de déterminer si la clientèle ainsi que la nature du service répondent aux exigences du Régime d'assistance publique du Canada.

3) Adaptation au travail

En vertu du Programme d'adaptation au travail du Régime d'assistance publique du Canada, onze nouveaux projets et un projet de planification ont été approuvés au cours de l'année. Les 53 projets, dont les coûts ont été partagés avec les provinces en 1975-1976, ont offerts à 2802 personnes nécessiteuses, ou en voie de l'être, qui avaient eu des difficultés particulières à obtenir ou à conserver un emploi, des possibilités d'améliorer leur motivation et leur capacité de travail, en participant à des programmes conçus pour les préparer à entrer sur le marché du travail ou à les réintégrer, ou à poursuivre une formation professionnelle.

4) Bureaux régionaux

Des bureaux régionaux existent dans neuf capitales provinciales. Le rôle principal du représentant fédéral, au niveau régional, est d'établir l'admissibilité et le droit de partage des coûts de divers programmes provinciaux de bien-être social, et d'assurer leur compatibilité avec les divers programmes administrés par la Direction. Il étudie aussi les demandes provinciales et agit comme source de documentation sur le partage des coûts de nouvelles initiatives des programmes dans les provinces. Ce dernier rôle, étant donné la spécialisation du représentant en matière de lois provinciales, est devenu très important, en raison des nombreux changements dans les programmes provinciaux.

II. ACTIVITÉS PRINCIPALES

1) Administration de l'assistance

i) Assistance sociale - La Division de l'Administration d'assistance (anciennement la Division du soutien du revenu) a continué d'administrer les dispositions d'assistance du Régime d'assistance publique du Canada relatives à la participation du gouvernement fédéral au partage des frais des services aux personnes nécessiteuses. Plusieurs provinces ont apporté des modifications importantes à leurs lois et leurs procédures administratives au cours de l'année, ce qui a engagé la Division dans un processus continu de consultation, d'enquête et de révision.

On a établi et mis en application, au cours de l'année, des directives provisoires pour les "Exemptions de revenu", les "Exemptions pour l'actif liquide", les "Allocations fixes pour les personnes âgées et les invalides" et le "Supplément aux personnes à faible revenu".

ii) Foyers de soins spéciaux - Les provinces ont continué de soumettre les noms d'établissements à inscrire à la liste des foyers de soins spéciaux en vertu du Régime d'assistance publique du Canada. On a effectué des examens sur place et approximativement 20 000 nouveaux lits ont été inscrits à la liste en vertu des dispositions du Régime. Les contributions du gouvernement fédéral en vertu du Régime d'assistance publique du Canada comprenaient environ 334 millions de dollars pour les soins en établissements.

2) Administration des services de réadaptation et de bien-être social

i) Services de réadaptation - La tendance principale, dans le domaine de la réadaptation des déficients mentaux, est de garder les personnes dans leur collectivité. Les services sont moins basés sur les établissements, de sorte que les déficients mentaux n'ont pas à être admis dans des établissements pour obtenir les soins et l'attention dont ils ont besoin. Des services pour aider les familles des déficients mentaux à comprendre et à accepter les difficultés de la déficience mentale sont en préparation dans les provinces.

ii) Services de garderies - Plusieurs nouveaux programmes provinciaux de garderies d'enfants ont été acceptés dans le cadre du programme de partage des frais. Tel qu'indiqué dans "La situation de la garde de jour au Canada, 1976", l'expansion des services de garderies a continué mais à un taux plus modéré que par les années passées.

I. INTRODUCTION

Le Régime d'assistance publique du Canada est le véhicule par lequel le gouvernement fédéral partage 50 pour cent des frais engagés par les provinces et les municipalités afin d'accorder l'assistance sociale aux personnes nécessiteuses. Le Régime prévoit aussi une quote-part fédérale de 50 pour cent de certains frais de services de bien-être social qui sont offerts aux personnes dans le besoin ou qui sont susceptibles de le devenir si elles ne reçoivent pas ces services. En vertu dudit Régime, le gouvernement fédéral partage les coûts des soins dispensés aux personnes nécessiteuses qui résident dans les établissements de bien-être social reconnus, tels que les foyers d'hébergement de vieillards, les maisons de repos, les institutions de soins pour enfants, ainsi que les établissements pour enfants et adultes physiquement ou mentalement handicapés. Le Régime s'étend également aux frais d'entretien des enfants confiés aux autorités provinciales de bien-être à l'enfance. En vertu du Régime d'assistance publique du Canada, le gouvernement fédéral paie aussi la moitié du coût des projets d'adaption au travail conçus pour améliorer la capacité de travail des personnes qui éprouvent des difficultés exceptionnelles à obtenir ou à conserver un emploi, ou à entreprendre une formation professionnelle.

Le Régime a pour objectifs principaux:

- d'assister les provinces dans le développement de programmes d'ensemble ayant pour but d'aider toute personne dans le besoin pour n'importe quelle raison;

- d'encourager les mesures visant à maintenir des taux d'assistance permettant aux bénéficiaires de garder un niveau de vie raisonnable;

- d'appuyer la mise en place et le développement des services de bien-être social qui peuvent contribuer à prévenir et à éliminer les causes et les effets de la pauvreté, de la négligence à l'égard des enfants et de la dépendance de l'assistance publique;

- de favoriser la prestation de soins convenables aux personnes nécessiteuses qui résident dans les foyers de soins spéciaux.

Réorganisation administrative

Une certaine réorganisation administrative a eu lieu au sein du Régime d'assistance publique du Canada au cours de l'année. La Division des services de bien-être social a été regroupée, avec la Section de la réadaptation professionnelle des invalides et la Section de l'adaptation au travail, pour former la Division de l'Administration des services de réadaptation et de bien-être social.

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L'honorable Monique Bégin
Ministre de la Santé nationale et du Bien-être social

Madame,

Conformément aux dispositions de l'Article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1976.

Je vous prie d'agréer, Madame, l'assurance de mes sentiments dévoués.

Le sous-ministre de la Santé nationale et du Bien-être social,

Bruce Rawson

Son Excellence l'honorable Jules Léger,
Gouverneur général et Commandant en chef du Canada.

QU'IL PLAISE À VOTRE EXCELLENCE,

J'ai l'honneur de présenter à Votre Excellence le Rapport annuel sur l'application du Régime d'assistance publique du Canada pour l'année financière terminée le 31 mars 1976.

Je vous prie d'agréer, Monsieur le Gouverneur général, l'assurance de mon profond respect.

Le ministre de la Santé
nationale et du
Bien-être social,

Monique Bégin

Régime d'assistance publique du Canada

Rapport annuel

1975-1976

RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA

75-76

RAPPORT ANNUEL

Santé et Bien-être social Canada
Health and Welfare Canada

57

Government Publications

NADA ASSISTANCE PLAN 76-77 ANNUAL REPORT

Health and Welfare Canada
Santé et Bien-être social Canada

Canada Assistance Plan

Annual Report

1976-77

His Excellency the Right Honourable Jules Léger
Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to Your Excellency the Annual Report on the Administration of the Canada Assistance Plan for the fiscal year ended March 31, 1977.

Respectfully submitted,

Monique Bégin
Minister of National Health
and Welfare

The Honourable Monique Bégin
Minister of National Health and Welfare

Madam:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the administration of the Plan for the fiscal year ended March 31, 1977.

Respectfully submitted,

Bruce Rawson
Deputy Minister of National Health and Welfare

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I. INTRODUCTION

The Canada Assistance Plan is a shared cost program through which the federal government pays 50 percent of the cost to the provinces and municipalities of providing social assistance to persons who are in need and 50 percent of certain costs of providing welfare services to persons who are in need or likely to become in need if they do not receive such services. The Plan provides for federal sharing in the cost of care for persons in need who reside in recognized welfare institutions such as homes for the aged, nursing homes, child care institutions, and institutions for physically and mentally handicapped children and adults. The costs of maintenance of children who are in the care of child welfare authorities are also covered by the Plan. Through the Canada Assistance Plan the federal government also shares on a 50-50 basis in the costs of work activity projects which are designed to improve the employability of persons who have unusual difficulty in finding or retaining jobs or in undertaking job training.

The major objectives of the Plan are:

- to assist the provinces in developing a comprehensive assistance program for all persons who are in need for whatever cause;

- to encourage the provision of adequate levels of assistance which would permit recipients to maintain a decent standard of living;

- to support the development and extension of welfare services which would help prevent and remove the causes and effects of poverty, child neglect and dependence on public assistance;

- to promote the provision of adequate levels of institutional care for those who require it.

II. MAJOR ACTIVITIES

1) Assistance Administration

i) Social Assistance - The Assistance Administration Division continued to administer the assistance provisions of the Canada Assistance Plan within the guidelines on "Earnings Exemptions", "Liquid Asset Exemptions", "Flat-rate Allowances to the Aged and the Disabled", and "Supplementation of Low Income Earnings" introduced in 1975-76. Changes in legislative and administrative procedures introduced by the provinces during the year involved the Division in a continuous process of consultation, investigation, and review.

The maximum shareable allowance payable under the guidelines on "Flat-rate Allowance to the Aged and the Disabled" was escalated in accordance with the cost of living index.

The first National Welfare Appeal Workshop attended by all provinces and territories, was held in November as a result of federal and provincial concerns for procedures respecting assistance and social services appeals. The workshop provided a national forum for the sharing of experiences and potential solutions in this area.

ii) Homes for Special Care - The provinces continued to submit institutions for listing as a home for special care under the Canada Assistance Plan. On-site reviews were carried out as required and approximately 7400 additional beds were listed under the Plan. Federal contributions under the Canada Assistance Plan included some $421 million for institutional care.

2) Rehabilitation and Welfare Services Administration

i) Rehabilitation Services - The trend in the rehabilitation of mentally handicapped persons is towards maintaining individuals in smaller facilities or encouraging them to continue living in their own family environment, while having access to community resources in order to obtain the care and attention they require. Services to assist the families of the retarded to understand and to cope with the problems of retardation are being developed in the individual provinces.

ii) Day Care Services - Over two hundred day care centres were submitted for listing under the Canada Assistance Plan Agreement and, following review, were approved for cost-sharing during the year. Most provincial day care programs have now been accepted for cost-sharing under the provisions of the Day Care Guidelines.

iii) Other Welfare Services - Community support services in the nature of information and referral services, homemaker and home-aides services continue to expand in accordance with efforts on the part of provinces and municipalities to support and maintain the elderly, the disabled, and disadvantaged children in their communities. Outreach services intended to identify and assist troubled youth before they become involved in antisocial behavior also continue to expand.

The trend towards the integration of welfare services with other services such as health services continues and has resulted in the development of administrative mechanisms to enable cost-sharing of welfare services which meet the requirements of the Canada Assistance Plan.

3) Work Activity

Under the Work Activity component of the Canada Assistance Plan, three new projects and one planning project were approved during the year. The 50 projects that were cost-shared with the provinces in 1976-77 provided opportunities for 2821 persons in need or likely to become in need who had experienced unusual difficulty in obtaining or holding employment, to improve their motivation and work capacity through participation in programs designed to prepare them for entry or return to employment or for further vocational training.

4) Field Offices

There are field offices in nine provincial capitals. The federal field representative's primary role is to establish the eligibility and shareability of various provincial welfare programs and to insure their compatibility under the various programs administered by the Directorate. (S)He also examines provincial claims and acts as an information resource on the shareability of new program initiatives in the provinces. This latter role, due to his/her expertise in provincial legislation, has become increasingly important because of the numerous changes in provincial programs.

III. OTHER ACTIVITIES

Supplementary Nursing Home Care Benefits

Supplementary Nursing Home Care Benefits agreements were renewed with the provinces of Ontario, Manitoba, and Alberta for the replacement of the Canada Assistance Plan revenues which were foregone by these provinces when they introduced universal nursing home care programs. As a result the federal government paid $63 million to these provinces during the year ending March 31, 1977.

Services to Young Offenders

Special agreements entered into with Ontario and New Brunswick effective April 1, 1974 under authority of the Appropriations Act, enabling cost-sharing of certain services provided by these provinces to young offenders in the care of correctional authorities, were renewed for the fiscal year April 1, 1976 - March 31, 1977. Shareable services are those which would be shareable under the Canada Assistance Plan if the young offenders were in the care of a provincial child welfare authority both in fact and in law.

A similar agreement was signed with the Yukon Territory in March 1977, authorizing federal sharing in these services from April 1, 1974.

IV. TABLES AND CHARTS

TABLE 1

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1976-77

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	24,850	8,868	1,579	2,244	2,540	266	40,347
Prince Edward Island	4,195	5,003	220	79	1,169	2	10,668
Nova Scotia	27,351	11,632	2,216	408	5,213	---	46,820
New Brunswick	53,018	7,221	1,112	1,271	4,266	378	67,266
Quebec*	312,762	218,775	20,956	13,285	47,000	2,052	614,830
Ontario	247,453	83,211	20,391	2,269	54,849	492	408,665
Manitoba	26,447	8,145	6,817	1,882	8,523	1,317	53,131
Saskatchewan	35,128	17,846	2,101	1,278	7,019	140	63,512
Alberta	65,174	19,906	8,423	79	13,570	---	107,152
British Columbia	105,986	38,935	3,526	9,584	26,430	240	184,701
Northwest Territories	1,552	1,487	152	26	1,042	---	4,259
Yukon	241	235	124	---	192	---	792
TOTAL	904,157	421,264	67,617	32,405	171,813	4,887	1,602,143

* Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance.

TABLE 2

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1975-76

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	23,534	7,556	1,451	2,012	2,222	---	36,775
Prince Edward Island	3,434	3,500	234	657	1,171	---	8,996
Nova Scotia	24,079	8,502	2,565	605	5,311	3	41,065
New Brunswick	39,418	3,298	1,069	1,416	4,370	696	50,267
Quebec*	260,392	165,791	22,131	12,229	32,703	---	493,246
Ontario	241,895	66,043	14,179	1,585	53,660	498	377,860
Manitoba	25,585	6,831	5,409	1,559	6,573	1,164	47,121
Saskatchewan	22,012	12,696	2,065	1,454	3,664	118	42,009
Alberta	52,640	18,449	7,197	3	11,497	1,245	91,031
British Columbia	107,901	40,163	5,894	4,378	26,807	244	185,387
Northwest Territories	2,188	1,223	231	17	1,061	---	4,720
Yukon	361	300	7	---	320	---	988
TOTAL	803,439	334,352	62,432	25,915	149,359	3,968	1,379,465

* Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance.

TABLE 3

NUMBER OF PERSONS BEING ASSISTED UNDER THE CANADA ASSISTANCE PLAN AS OF MARCH 31, 1977

PROVINCE	Child Care	Assistance* Recipients	Adults in Homes for Special Care	TOTAL
Newfoundland	4,803	52,424	2,608	59,835
Prince Edward Island	277	8,685**	1,149**	10,111
Nova Scotia	2,294	55,932	3,586***	61,812
New Brunswick	2,752	67,130	3,952	73,834
Quebec	31,200**	457,053	23,505	511,758
Ontario	13,710	338,909	43,000*	395,619
Manitoba	2,936	55,251	1,135	59,322
Saskatchewan	2,715	38,807	7,496	49,018
Alberta	10,981	86,464	3,217	100,662
British Columbia	10,200**	162,000**	7,700**	179,900
Northwest Territories Yukon	1,030**	5,329	170**	6,529
TOTAL	82,898	1,327,984	97,518	1,508,400

* Includes dependents
** Estimates
*** Covers the calendar year 1976 only.

Source: Canada Assistance Plan Directorate, Department of National Health and Welfare.

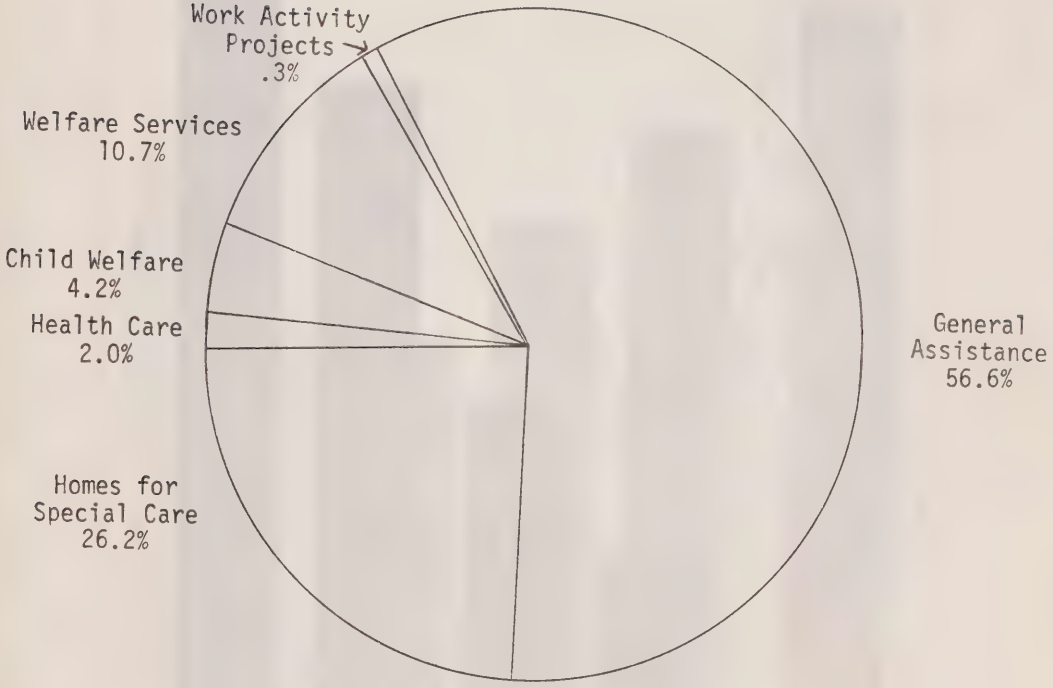


CHART 1 - ALLOCATION OF EXPENDITURES SHARED UNDER THE CANADA ASSISTANCE PLAN FISCAL YEAR 1976-1977

Federal Payments to Provinces

The percentage increase of total federal payments to the provinces over 1975-1976 is 16.14 which generally reflects increased costs of welfare programs mainly due to increased rate structures and clientele serviced.

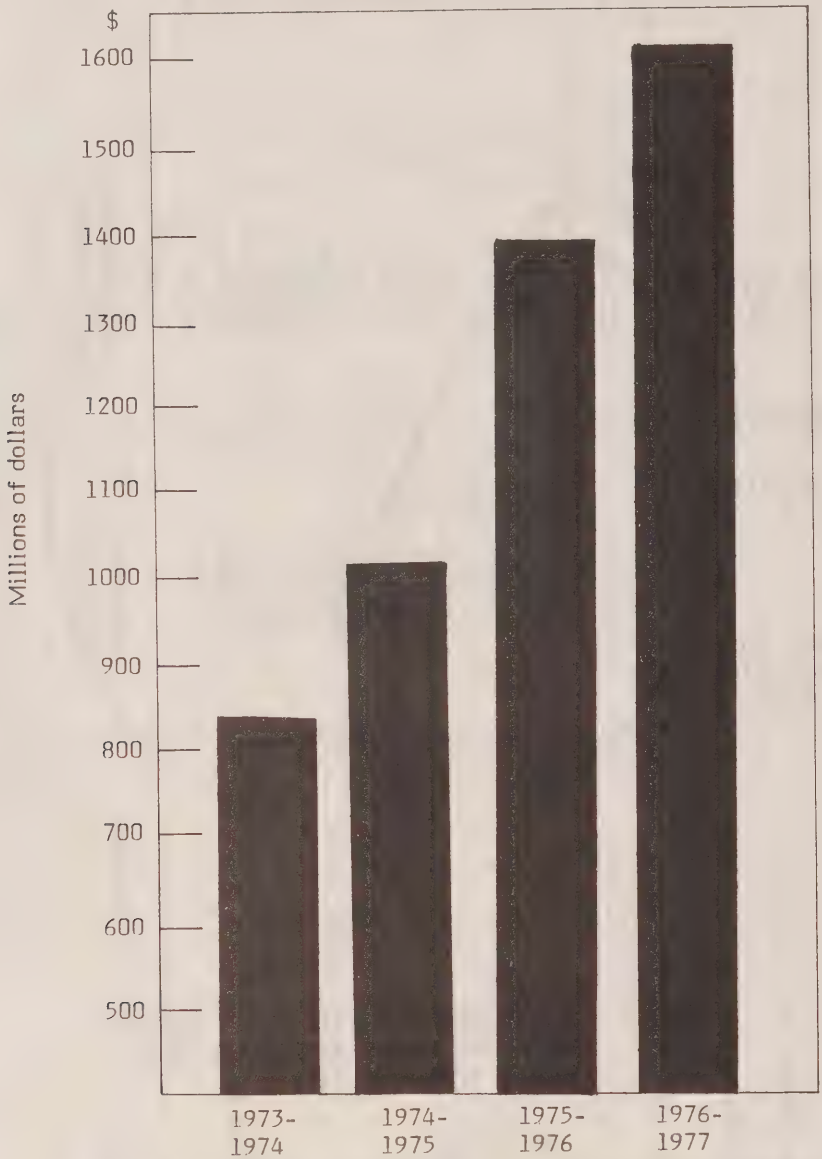


CHART 2 - TOTAL FEDERAL PAYMENTS UNDER THE CANADA ASSISTANCE PLAN

including payments to Quebec under the Established Programs (Interim Arrangements) Act

General Assistance

The growth in general assistance costs in 1976-1977 was due to higher provincial assistance rates and the rising cost of living.

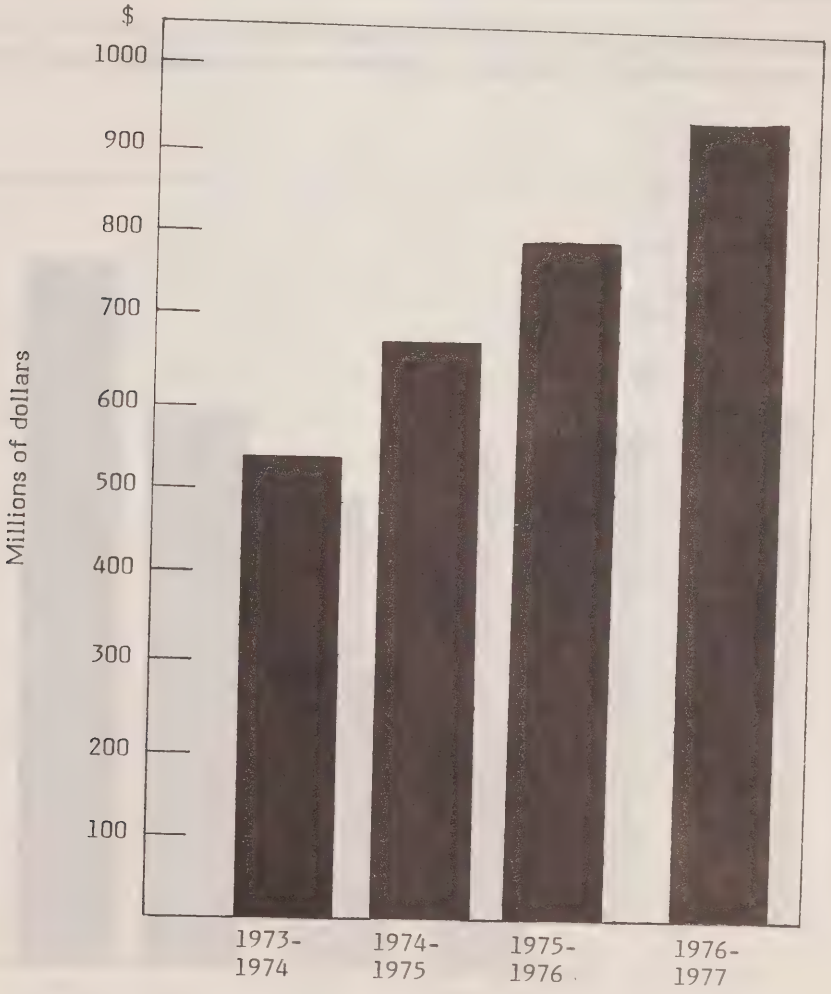


CHART 3 - GENERAL ASSISTANCE
- FEDERAL SHARE OF COSTS

Homes for Special Care

The increase of federal contributions in 1976-1977 towards the costs of care in a home for special care was a result of the continuing trend to establish smaller facilities in the community and to convert institutions for mentally handicapped persons, such as hospital schools and mental hospitals, to welfare institutions which are eligible for cost-sharing under the Canada Assistance Plan Agreement.

In addition there has been a general increase in the cost of providing institutional care in most provinces which is reflected in a higher cost of assistance to persons in need.

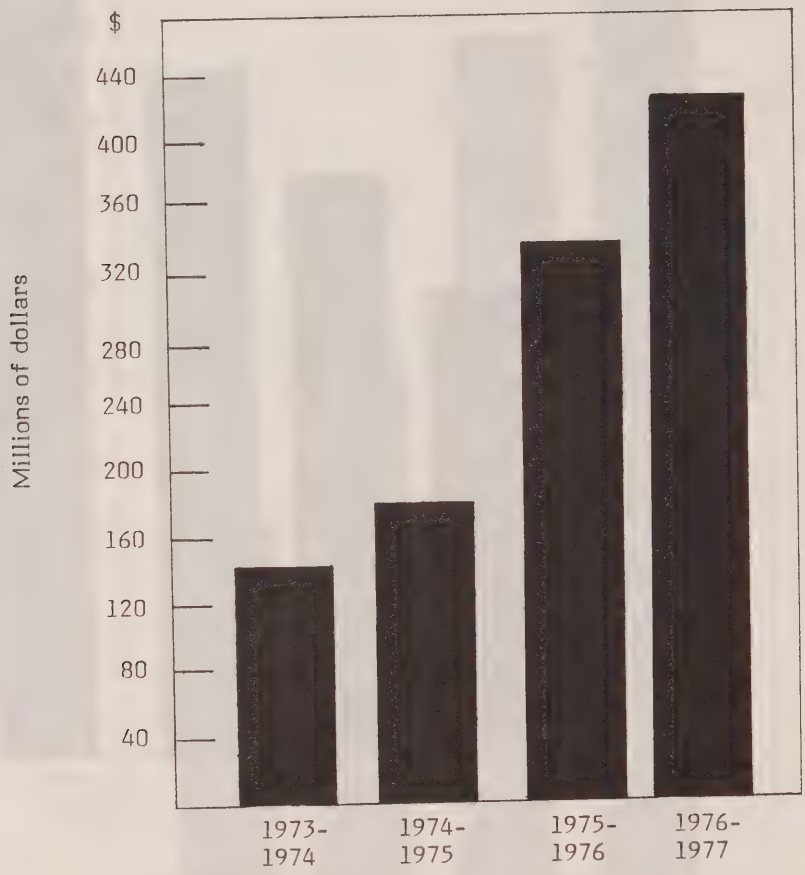


CHART 4 - HOMES FOR SPECIAL CARE
- FEDERAL SHARE OF COSTS

Child Welfare

The general decrease in child care caseloads continued in 1976-1977 but was slightly offset by increased costs attributable largely to higher costs of maintenance, salaries and services.

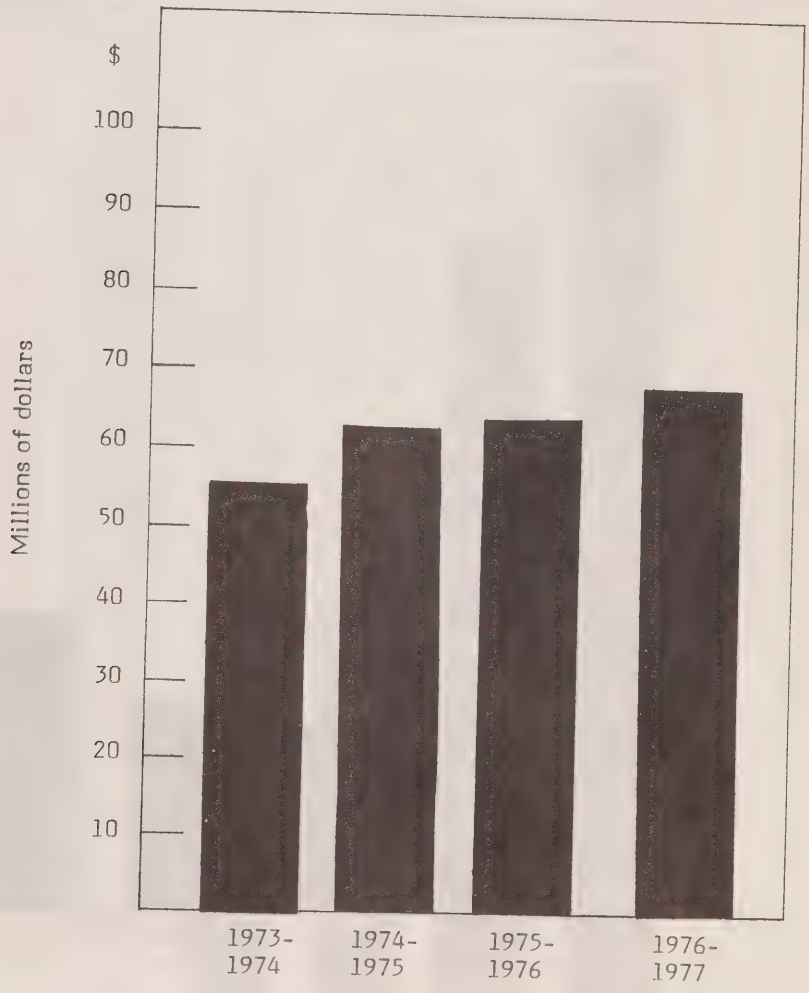


CHART 5 - CHILD WELFARE
- FEDERAL SHARE OF COSTS

Health Care

The increase in the amount of federal payments to provinces towards the costs of health care services in 1976-1977 was a reflection of the general inflationary trend for the period.

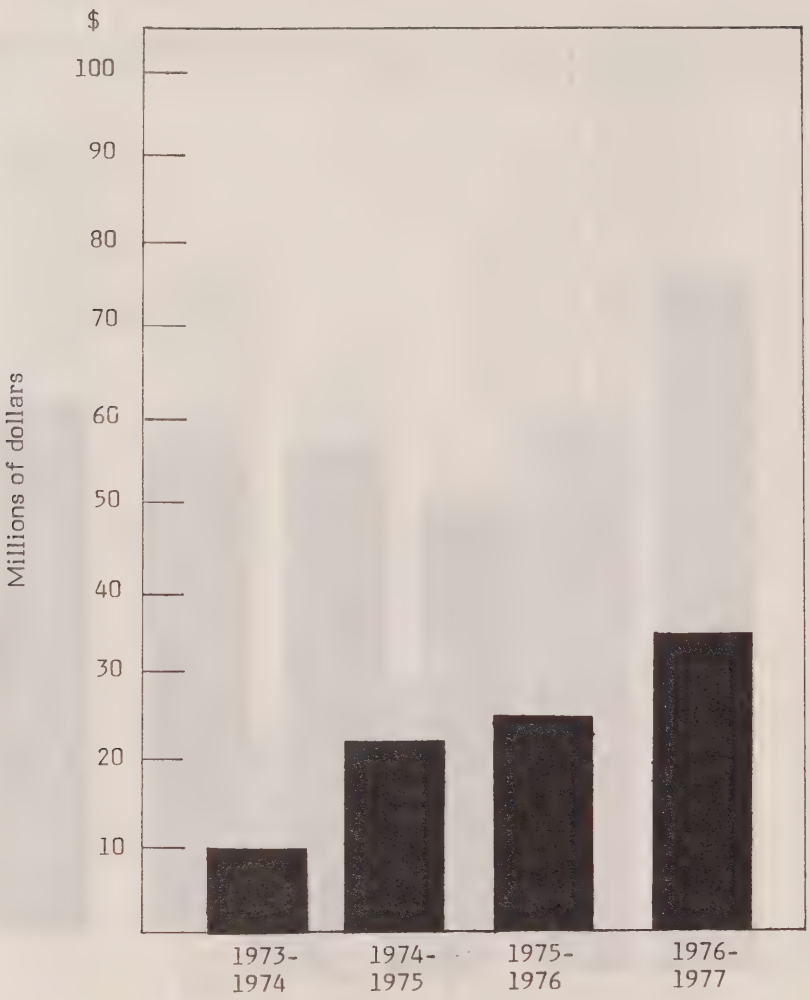


CHART 6 - HEALTH CARE FOR PERSONS IN NEED
- FEDERAL SHARE OF COSTS

Welfare Services

The rapid increase in federal contributions experienced in 1975-1976 continued during 1976-1977. This was the result of a general increase in the cost to the provinces and municipalities of providing welfare services together with the increased emphasis on their part in expanding existing services. The additional spending may be attributed to the development of new services especially the child welfare services, day care services and homemaker services.

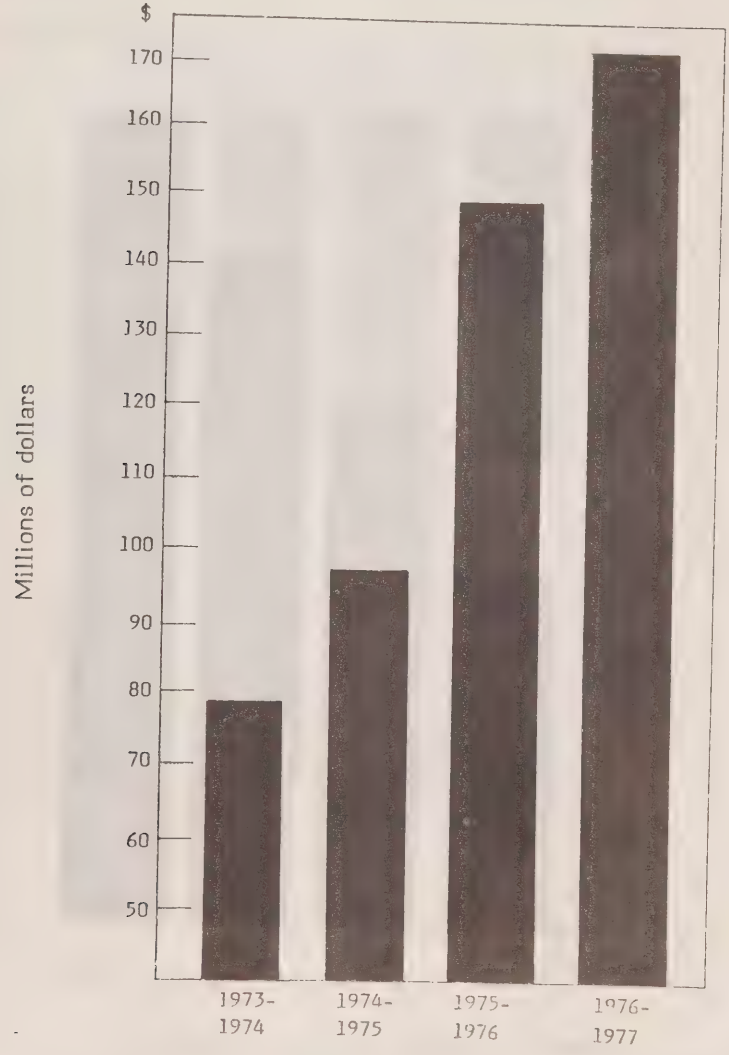


CHART 7 - WELFARE SERVICES
- FEDERAL SHARE OF COSTS

Work Activity

The increase in this area over 1975-1976 was due to an increase in the number of participants served, and the continued development of the social rehabilitation components within projects to better meet the special requirements of more persons in need or likely to become in need who, for personal, family and/or environmental reasons, were not able to obtain or maintain employment in the labour market.

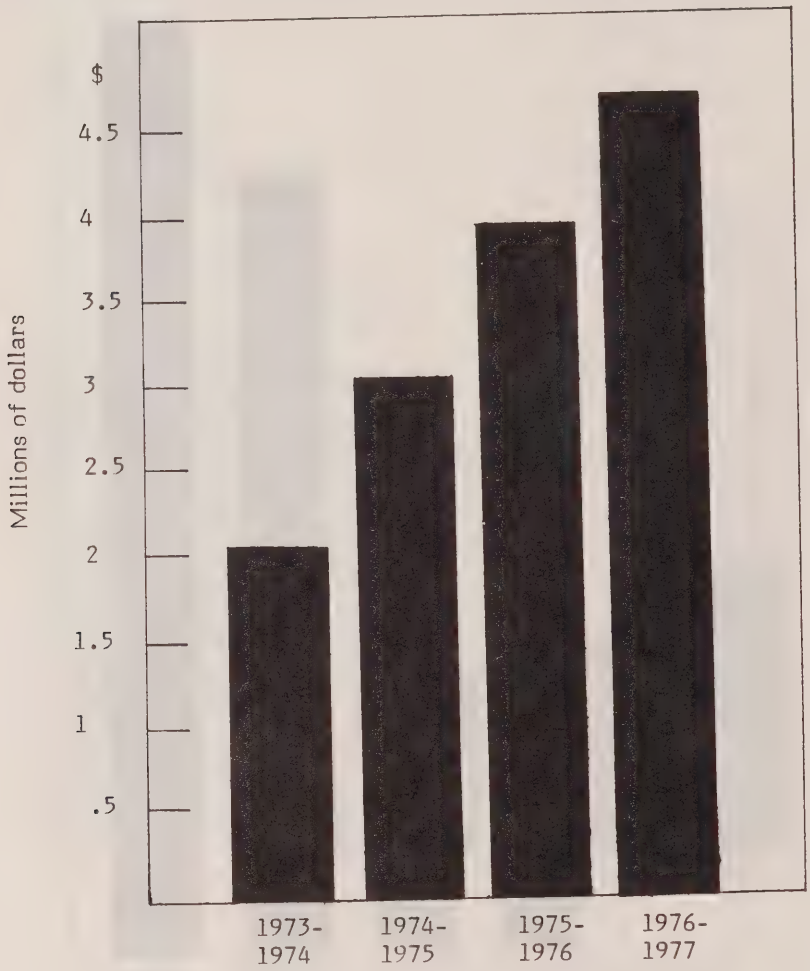


CHART 8 - WORK ACTIVITY PROJECTS
- FEDERAL SHARE OF COSTS

L'adaptation au travail

L'augmentation, dans ce domaine, par rapport à 1975-1976, est imputable à l'accroissement du nombre de participants, et au développement continu en matière de réadaptation sociale, dans le cadre de projets visant à mieux satisfaire les besoins spéciaux d'un plus grand nombre de personnes nécessiteuses, ou en voie de le devenir, lesquelles, pour des raisons personnelles, de famille ou de milieu, ne pouvaient trouver ou conserver un emploi.

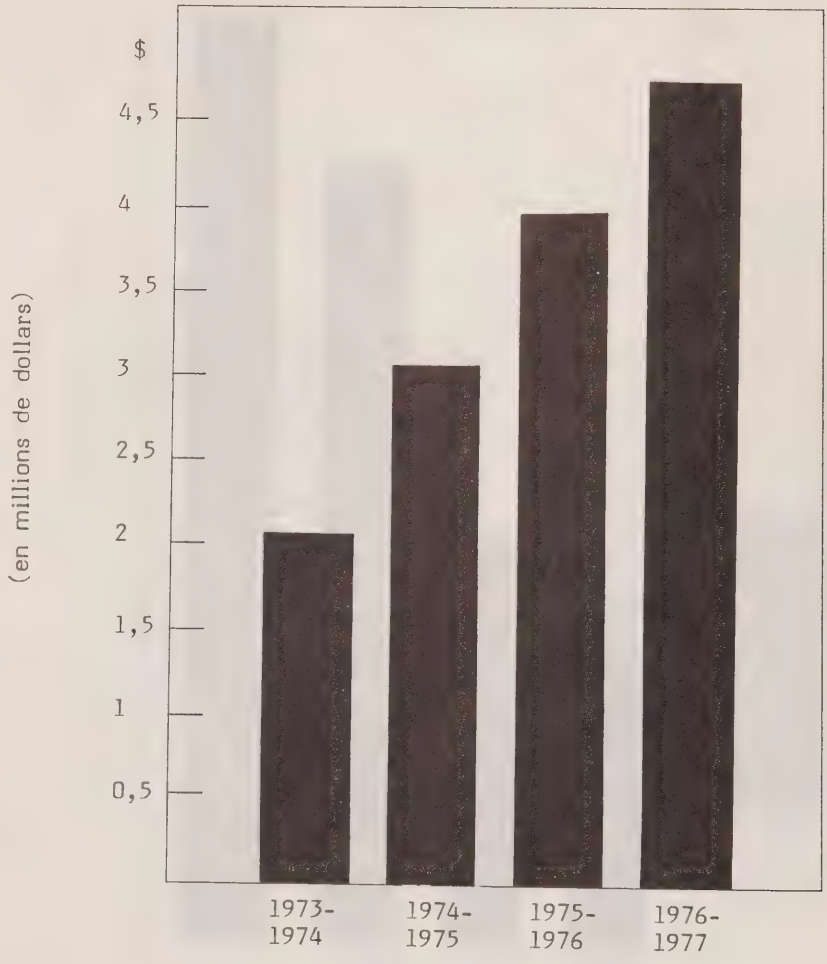


DIAGRAMME 8 - COÛTS DES PROJETS D'ADAPTATION AU TRAVAIL - CONTRIBUTION FÉDÉRALE

Services de bien-être social

L'accroissement accéléré des contributions fédérales, enregistré en 1975-1976, s'est poursuivi en 1976-1977. Cette augmentation a résulté d'une hausse générale des coûts des provinces et des municipalités dans la distribution des services de bien-être, en plus d'une tendance accrue de leur part à élargir la gamme des services offerts. Les dépenses supplémentaires peuvent être attribuées à la mise sur pied de nouveaux services, surtout des services de bien-être à l'enfance, des services de garderies et des services d'auxiliaires familiales.

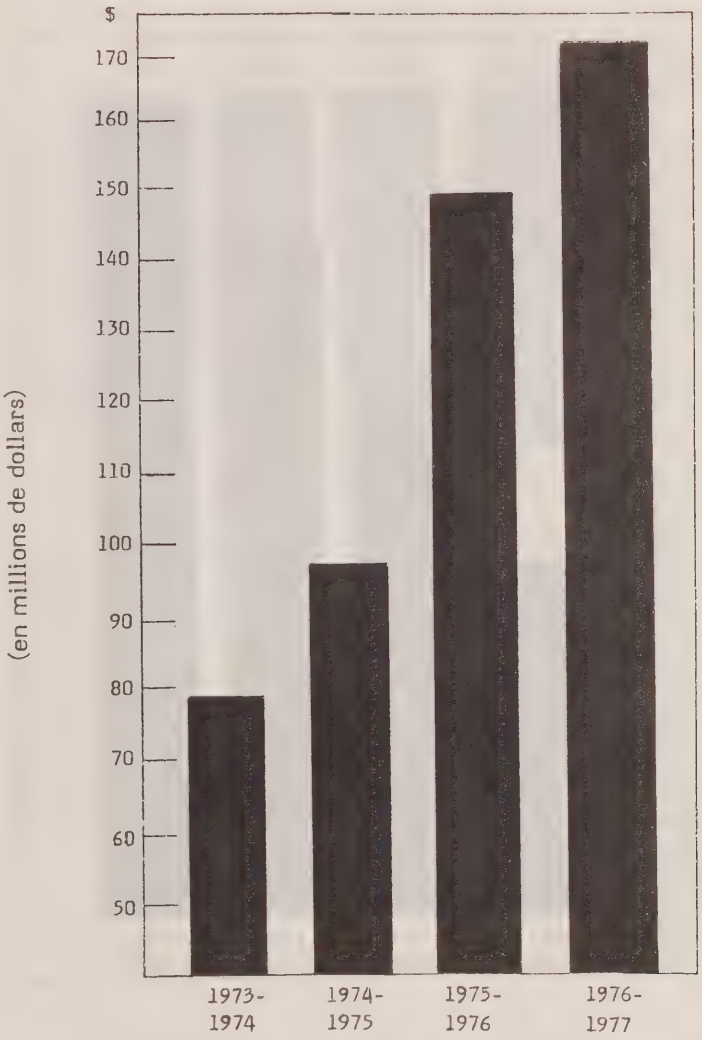


DIAGRAMME 7 - COÛTS DES SERVICES DE BIEN-ÊTRE SOCIAL
- CONTRIBUTION FÉDÉRALE

Soins médicaux

L'augmentation des versements fédéraux aux provinces, pour les coûts des services de soins médicaux en 1976-1977, reflète la tendance inflationniste générale pour la période.

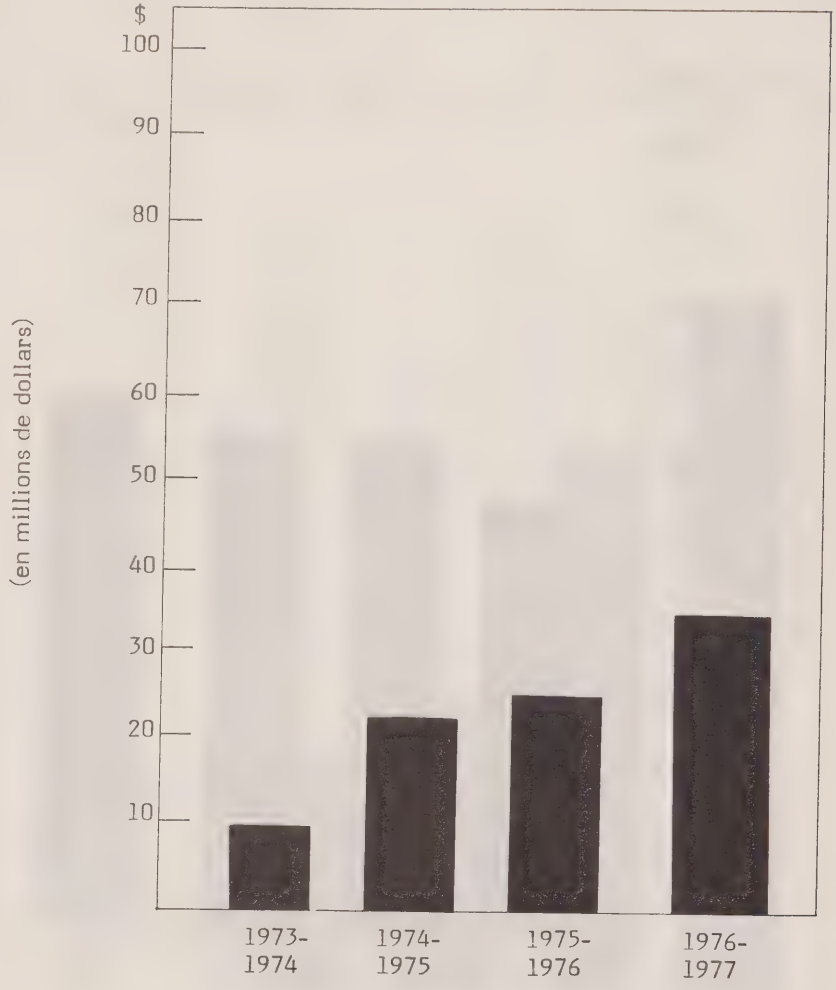


DIAGRAMME 6 - COÛTS DES SOINS MÉDICAUX POUR PERSONNES NÉCESSITEUSES - CONTRIBUTION FÉDÉRALE

Bien-être à l'enfance

La diminution générale du nombre de cas de services de bien-être à l'enfance a continué en 1976-1977, mais elle a été légèrement contrebalancée par une augmentation des coûts, attribuables en grande partie à la hausse des sommes consacrées à l'entretien, aux salaires et aux services.

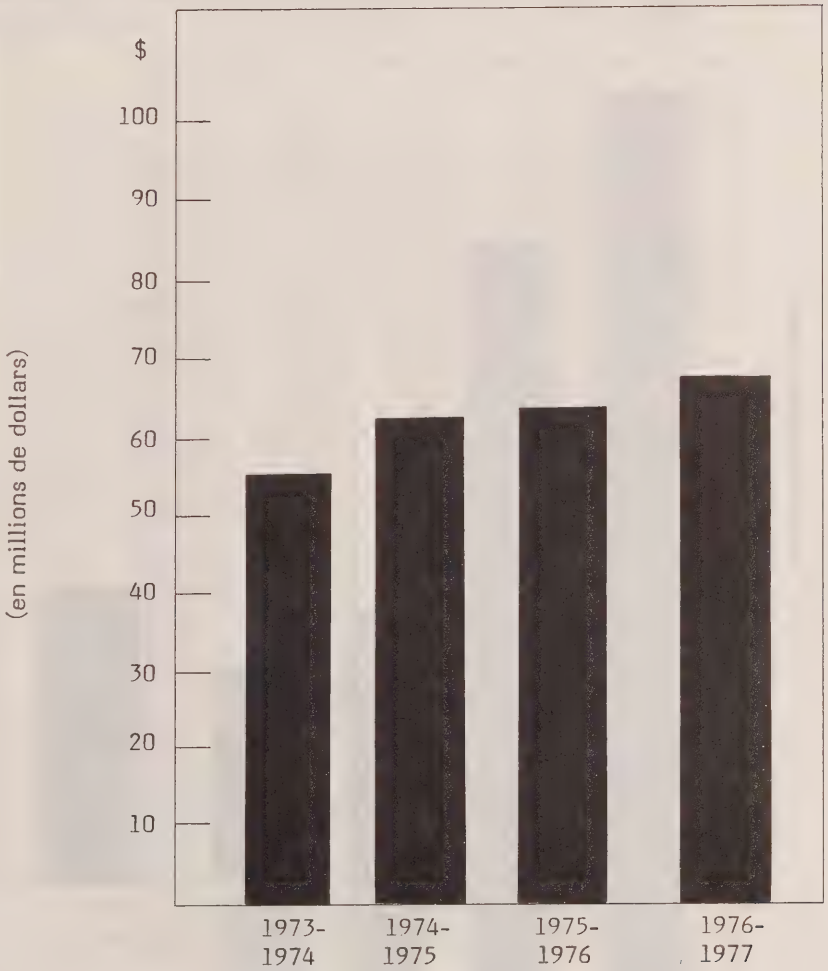


DIAGRAMME 5 - COÛTS DES SERVICES DE BIEN-ÊTRE À L'ENFANCE
- CONTRIBUTION FÉDÉRALE

Foyers de soins spéciaux

L'augmentation de la contribution fédérale, en 1976-1977, au coût des soins dans les foyers de soins spéciaux, résulte de la tendance générale à établir de plus petites installations communautaires et à convertir des établissements pour déficients mentaux, tels que des hôpitaux d'enseignement et des hôpitaux psychiatriques, en établissements de bien-être social qui ont droit au partage des frais en vertu du Régime d'assistance publique du Canada.

De plus, il y a eu augmentation générale du coût des soins en établissement, dans la plupart des provinces, laquelle se traduit par une hausse de coût de l'assistance aux personnes nécessiteuses.

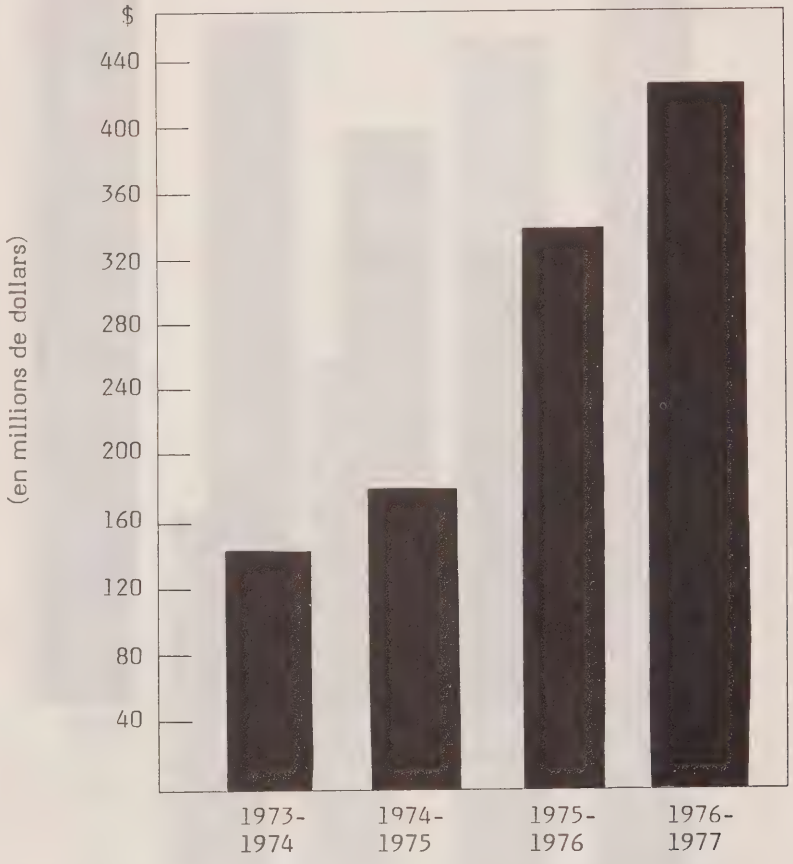


DIAGRAMME 4 - COÛTS DES FOYERS DE SOINS SPÉCIAUX
- CONTRIBUTION FÉDÉRALE

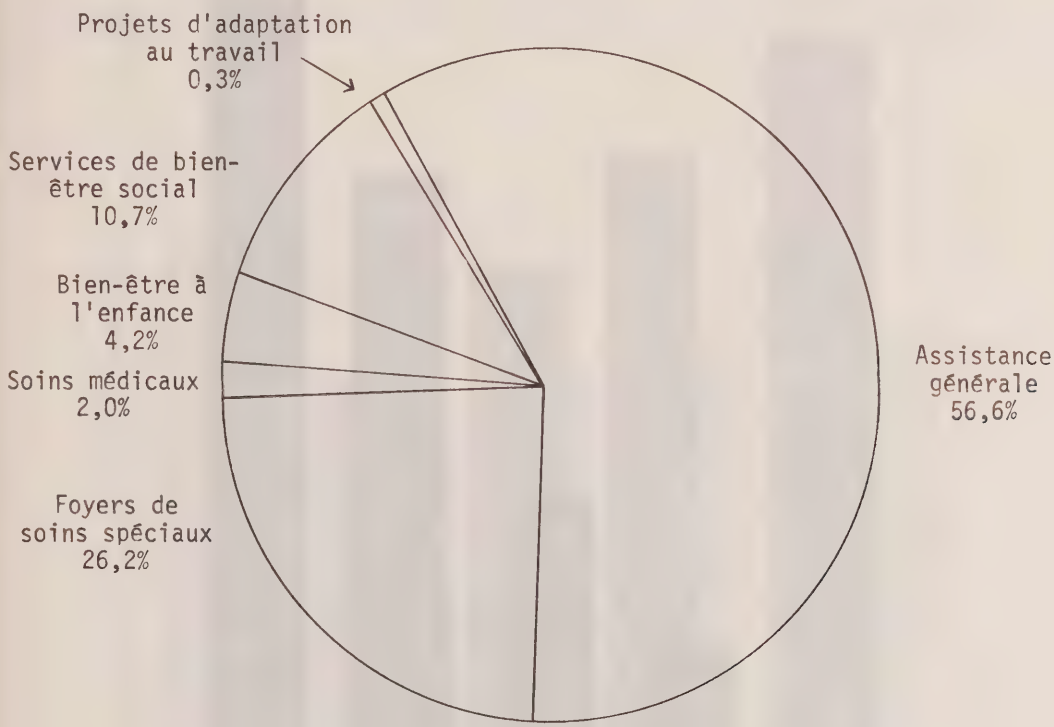


DIAGRAMME 1 - RÉPARTITION DES DÉPENSES PARTAGÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, ANNÉE FINANCIÈRE 1976-1977

TABLEAU 3

NOMBRE DE PERSONNES ASSISTÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE CANADA, AU 31 MARS 1977

PROVINCE	Service à l'enfance	Assistés sociaux*	Adultes dans les foyers de soins spéciaux	TOTAL
Terre-Neuve	4 803	52 424	2 608	59 835
Île-du-Prince-Édouard	277	8 685**	1 149**	10 111
Nouvelle-Écosse	2 294	55 932	3 586***	61 812
Nouveau-Brunswick	2 752	67 130	3 952	73 834
Québec	31 200**	457 053	23 505	511 758
Ontario	13 710	338 909	43 000*	395 619
Manitoba	2 936	55 251	1 135	59 322
Saskatchewan	2 715	38 807	7 496	49 018
Alberta	10 981	86 464	3 217	100 662
Colombie-Britannique	10 200**	162 000**	7 700**	179 900
Territoires du Nord-Ouest	1 030**	5 329	170**	6 529
Yukon				
TOTAL	82 898	1 327 984	97 518	1 508 400

* Y compris personnes à charge.
** Prévisions.
*** Couvre l'année civile 1976 seulement.

Source: Direction du Régime d'assistance publique du Canada, ministère de la Santé nationale et du Bien-être social.

TABLEAU 2

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA PAR PROGRAMME, ANNÉE FINANCIÈRE 1975-1976

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail Partie III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	23 534	7 556	1 451	2 012	2 222	-	36 775
Île-du-Prince-Édouard	3 434	3 500	234	657	1 171	-	8 996
Nouvelle-Écosse	24 079	8 502	2 565	605	5 311	3	41 065
Nouveau-Brunswick	39 418	3 298	1 069	1 416	4 370	696	50 267
Québec*	260 392	165 791	22 131	12 229	32 703	-	493 246
Ontario	241 895	66 043	14 179	1 585	53 660	498	377 860
Manitoba	25 585	6 831	5 409	1 559	6 573	1 164	47 121
Saskatchewan	22 012	12 696	2 065	1 454	3 664	118	42 009
Alberta	52 640	18 449	7 197	3	11 497	1 245	91 031
Colombie-Britannique	107 901	40 163	5 894	4 378	26 807	244	185 387
Territoires du Nord-Ouest	2 188	1 223	231	17	1 061	-	4 720
Yukon	361	300	7	-	320	-	988
TOTAL	803 439	334 352	62 432	25 915	149 359	3 968	1 379 465

* Montants versés au Québec par le ministère des Finances (Évaluation) en vertu de la Loi sur les programmes établis (Arrangements provisoires).

TABLEAU 1

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA PAR PROGRAMME, ANNÉE FINANCIÈRE 1976-1977

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être à l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail Partie III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	24 850	8 868	1 579	2 244	2 540	266	40 347
Île-du-Prince-Édouard	4 195	5 003	220	79	1 169	2	10 668
Nouvelle-Écosse	27 351	11 632	2 216	408	5 213	-	46 820
Nouveau-Brunswick	53 018	7 221	1 112	1 271	4 266	378	67 266
Québec*	312 762	218 775	20 956	13 285	47 000	2 052	614 830
Ontario	247 453	83 211	20 391	2 269	54 849	492	408 665
Manitoba	26 447	8 145	6 817	1 882	8 523	1 317	53 131
Saskatchewan	35 128	17 846	2 101	1 278	7 019	140	63 512
Alberta	65 174	19 906	8 423	79	13 570	-	107 152
Colombie-Britannique	105 986	38 935	3 526	9 584	26 430	240	184 701
Territoires du Nord-Ouest	1 552	1 487	152	26	1 042	-	4 259
Yukon	241	235	124	-	192	-	792
TOTAL	904 157	421 264	67 617	32 405	171 813	4 887	1 602 143

* Montants versés au Québec par le ministère des Finances, en vertu de la Loi sur les programmes établis (Arrangements provisoires).

IV. TABLEAUX ET DIAGRAMMES

III. AUTRES ACTIVITÉS

Prestations supplémentaires pour soins dans les maisons de repos

Des ententes sur des prestations supplémentaires pour soins dans les maisons de repos ont été renouvellées avec les provinces de l'Ontario, du Manitoba et de l'Alberta, pour remplacer les revenus du Régime d'assistance publique du Canada, auxquels ces provinces avaient renoncé en introduisant des programmes universels de soins dans les maisons de repos. Le gouvernement fédéral a donc versé 63 millions de dollars à ces provinces, au cours de l'année se terminant le 31 mars 1977.

Services de réadaptation des délinquants juvéniles

Des ententes spéciales conclues en vertu de la Loi portant affectation de crédits avec les gouvernements de l'Ontario et du Nouveau-Brunswick, et en vigueur depuis le 1er avril 1974, assurent le partage des coûts de certains services offerts par ces provinces aux délinquants juvéniles placés sous la juridiction des autorités de correction et ont été renouvellées pour l'année fiscale s'étendant du 1er avril 1976 au 31 mars 1977. Les services admis au partage des frais sont ceux pour lesquels des contributions fédérales auraient pu être versées en vertu du Régime d'assistance publique du Canada, si les enfants avaient été sous la garde des autorités provinciales de bien-être à l'enfance tant en fait qu'en droit.

Une entente similaire conclue avec le Territoire du Yukon en mars 1977 assure la participation du gouvernement fédéral aux coûts de ces services à compter du 1er avril 1974.

ii) Services de garderies - Les noms de plus de 200 garderies ont été soumis pour inscription à la liste des garderies en vertu du Régime d'assistance publique du Canada et, après révision, ces garderies ont été acceptées dans le cadre du programme de partage des frais. La plupart des programmes provinciaux de garderies d'enfants ont été acceptés dans le cadre du programme de partage des frais en vertu des dispositions de la Directive sur les garderies.

iii) Autres services de bien-être social - Les services communautaires d'aide, qu'il s'agisse de services d'information et d'orientation ou de services d'auxiliaires familiales et d'aides ménagères, ont continué de prendre de l'expansion conformément aux efforts déployés par les provinces et les municipalités en vue d'accorder aide et appui aux personnes âgées, aux invalides et aux enfants défavorisés dans le milieu communautaire. Les services d'aide directe, établis pour identifier les jeunes qui ont des problèmes et pour leur venir en aide avant qu'ils adoptent un comportement anti-social, continuent aussi de prendre de l'expansion.

La tendance à vouloir intégrer les services de bien-être social aux autres services, tels que les services de santé, se maintient et elle a entraîné la mise au point de mécanismes administratifs afin que les services de bien-être qui répondent aux exigences du Régime d'assistance publique du Canada puissent être inclus dans un programme de partage des frais.

3) Adaptation au travail

En vertu du Programme d'adaptation au travail du Régime d'assistance publique du Canada, trois nouveaux projets et un projet de planification ont été approuvés au cours de l'année. Les 50 projets, dont les coûts ont été partagés avec les provinces en 1976-1977, ont offert à 2821 personnes nécessiteuses, ou en voie de l'être, qui avaient eu des difficultés particulières à obtenir ou à conserver un emploi, des possibilités d'améliorer leur motivation et leur capacité de travail, en participant à des programmes conçus pour les préparer à entrer sur le marché du travail ou à le réintégrer, ou à poursuivre une formation professionnelle.

4) Bureaux régionaux

Des bureaux régionaux existent dans neuf capitales provinciales. Le rôle principal du représentant fédéral, au niveau régional, est d'établir l'admissibilité et le droit de partage des coûts de divers programmes provinciaux de bien-être social et d'assurer leur compatibilité avec les divers programmes administrés par la Direction. Il étudie aussi les demandes provinciales et agit comme source de documentation sur le partage des coûts de nouvelles initiatives des programmes dans les provinces. Ce dernier rôle, étant donné la spécialisation du représentant en matière de lois provinciales, est devenu très important, en raison des nombreux changements dans les programmes provinciaux.

II. ACTIVITÉS PRINCIPALES

1) Administration de l'assistance

i) Assistance sociale - La Division de l'Administration d'assistance a continué d'administrer les dispositions d'assistance du Régime d'assistance publique du Canada conformément aux directives sur les "Exemptions de revenu", les "Exemptions pour l'actif liquide", les "Allocations fixes pour les personnes âgées et les invalides" et le "Supplément aux personnes à faible revenu", établies en 1975-1976. Les modifications que les provinces ont apportées au cours de l'année à leurs lois et à leurs procédures administratives ont engagé la Division dans un processus continu de consultation, d'enquête et de révision.

Le montant maximal de la contribution fédérale dans le cadre des "Allocations fixes pour les personnes âgées et les invalides" a été ajusté conformément à l'augmentation de l'indice du coût de la vie.

Le premier atelier sur les appels dans le secteur du bien-être social, auquel toutes les provinces et les territoires ont participé, s'est tenu en novembre. Cet atelier, qui traduisait les préoccupations des gouvernements fédéral et provinciaux à l'égard des procédures d'appel dans le domaine des services d'assistance et de bien-être social, a fourni une tribune nationale où diverses expériences ont pu être partagées et des solutions envisagées.

ii) Foyers de soins spéciaux - Les provinces ont continué de soumettre les noms d'établissements à inscrire à la liste des foyers de soins spéciaux en vertu du Régime d'assistance publique du Canada. On a effectué des examens sur place et approximativement 7400 nouveaux lits ont été inscrits à la liste en vertu des dispositions du Régime. Les contributions du gouvernement fédéral en vertu du Régime d'assistance publique du Canada comprenaient environ 421 millions de dollars pour les soins en établissements.

2) Administration des services de réadaptation et de bien-être social

i) Services de réadaptation - La tendance, dans le domaine de la réadaptation des déficients mentaux, est de garder les personnes dans des établissements plus petits ou de les encourager à continuer de vivre dans leur milieu familial, tout en ayant accès aux ressources communautaires pour obtenir les soins et l'attention requis. Des services pour aider les familles des déficients mentaux à comprendre et à accepter les difficultés de la déficience mentale sont en préparation dans les provinces.

I. INTRODUCTION

Le Régime d'assistance publique du Canada est le véhicule par lequel le gouvernement fédéral partage 50 pour cent des frais engagés par les provinces et les municipalités afin d'accorder l'assistance sociale aux personnes nécessiteuses. Le Régime prévoit aussi une quote-part fédérale de 50 pour cent de certains frais de services de bien-être social qui sont offerts aux personnes dans le besoin ou qui sont susceptibles de le devenir si elles ne reçoivent pas ces services. En vertu dudit Régime, le gouvernement fédéral partage les coûts des soins dispensés aux personnes nécessiteuses qui résident dans les établissements de bien-être social reconnus, tels que les foyers d'hébergement de vieillards, les maisons de repos, les institutions de soins pour enfants, ainsi que les établissements pour enfants et adultes physiquement ou mentalement handicapés. Le Régime s'étend également aux frais d'entretien des enfants confiés aux autorités provinciales de bien-être à l'enfance. En vertu du Régime d'assistance publique du Canada, le gouvernement fédéral paie aussi la moitié du coût des projets d'adaptation au travail conçus pour améliorer la capacité de travail des personnes qui éprouvent des difficultés exceptionnelles à obtenir ou à conserver un emploi, ou à entreprendre une formation professionnelle.

Le Régime a pour objectifs principaux:

- d'assister les provinces dans le développement de programmes d'ensemble ayant pour but d'aider toute personne dans le besoin pour n'importe quelle raison;

- d'encourager les mesures visant à maintenir des taux d'assistance permettant aux bénéficiaires de garder un niveau de vie raisonnable;

- d'appuyer la mise en place et le développement des services de bien-être social qui peuvent contribuer à prévenir et à éliminer les causes et les effets de la pauvreté, de la négligence à l'égard des enfants et de la dépendance de l'assistance publique;

- de favoriser la prestation de soins convenables aux personnes nécessiteuses qui résident dans les foyers de soins spéciaux.

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L'honorable Monique Bégin
Ministre de la Santé nationale et du Bien-être social

Madame,

Conformément aux dispositions de l'Article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1977.

Je vous prie d'agréer, Madame, l'assurance de mes sentiments dévoués.

Le sous-ministre de la Santé nationale et du Bien-être social,

Bruce Rawson

Son Excellence l'honorable Jules Léger,
Gouverneur général et Commandant en chef du Canada.

QU'IL PLAISE À VOTRE EXCELLENCE,

J'ai l'honneur de présenter à Votre Excellence le Rapport annuel sur l'application du Régime d'assistance publique du Canada pour l'année financière terminée le 31 mars 1977.

Je vous prie d'agréer, Monsieur le Gouverneur général, l'assurance de mon profond respect.

Le ministre de la Santé
nationale et du
Bien-être social,

Monique Bégin

Régime d'assistance publique du Canada

Rapport annuel

1976-1977

ÉGIME D'ASSISTANCE UBLIQUE DU CANADA 76-77 RAPPORT ANNUEL



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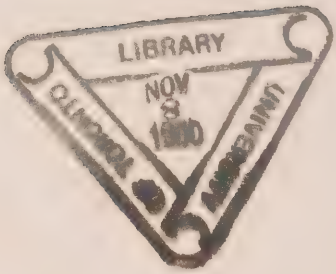
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His Excellency the Right Honourable E.R. Schreyer Governor General and Commander-in-Chief of Canada.

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to Your Excellency the Annual Report on the Administration of the Canada Assistance Plan for the fiscal year ended March 31, 1978.

Respectfully submitted,

Monique Bégin
Minister of National Health
and Welfare

The Honourable Monique Bégin
Minister of National Health and Welfare

Madam:

In accordance with Section 20 of the Canada Assistance Plan, I have the honour to present the Annual Report on the Administration of the Plan for the fiscal year ended March 31, 1978.

Respectfully submitted,

Pamela A. McDougall
Deputy Minister of National
Health and Welfare

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I. INTRODUCTION

The Canada Assistance Plan (CAP) is a shared cost program through which the federal government pays 50 percent of the cost to the provinces and municipalities of providing social assistance to persons who are in need and 50 percent of certain costs of providing welfare services to persons who are in need or likely to become in need if they do not receive such services. The Plan provides for federal sharing in the cost of care for persons in need who reside in recognized welfare institutions such as homes for the aged, nursing homes, child care institutions, and institutions for physically and mentally handicapped children and adults. The costs of maintenance of children who are in the care of child welfare authorities are also covered by the Plan. Through CAP the federal government also shares on a 50-50 basis in the costs of work activity projects which are designed to improve the employability of persons who have unusual difficulty in finding or retaining jobs or in undertaking job training.

The major objectives of the Plan are:

- to assist the provinces in developing a comprehensive assistance program for all persons who are in need for whatever cause;

- to encourage the provision of adequate levels of assistance which would permit recipients to maintain a decent standard of living;

- to support the development and extension of welfare services which would help prevent and remove the causes and effects of poverty, child neglect and dependence on public assistance;

- to promote the provision of adequate levels of institutional care for those who require it.

II. MAJOR ACTIVITIES

1) Assistance Administration

i) Social Assistance - The Assistance Administration Division continued to administer the assistance provisions of the Canada Assistance Plan. Changes in legislation and administrative procedures introduced by the provinces during the year involved the Division in a continuous process of consultation, investigation and review.

The Division also administered the guidelines which regulate some of the assistance provisions of the Act, namely, the guidelines on "Earnings Exemptions", "Liquid Asset Exemptions", "Flat Rate Allowances to the Aged and Disabled" and "Supplementation of Low Income Earnings", all of which were introduced in 1975-76. The maximum shareable allowance payable under the guidelines on "Flat Rate Allowances to the Aged and the Disabled" was escalated in accordance with the cost of living index.

In the area of appeals, the Division initiated work on a publication, "Outline of Provincial Welfare Appeal Systems in Canada", in preparation for the second National Welfare Appeal Workshop of November 1978.

A major development during the year was the introduction of the Federal-Provincial Fiscal Arrangements and Established Programs Financing (FPFA-EPF) Act effective April 1, 1977. Under the FPFA-EPF Act, the federal government makes a per capita payment to the provinces to cover the cost of certain types of adult institutional care, home care services and ambulatory health care services provided in the provinces. The inclusion of home care services and ambulatory health care services in the per capita payment had a direct impact on cost-sharing in health care costs as an item of assistance under the Plan.

ii) Homes for Special Care - The federal per capita payment to the provinces under FPFA-EPF Act to cover Nursing Home Intermediate Care and Adult Residential Care Services had a major impact on the Homes for Special Care Program under C.A.P. Where C.A.P. previously shared in the total cost of maintaining adults in need in such institutions, C.A.P. sharing is now limited to the current Old Age Security/ Guaranteed Income Supplement maximum for a single individual. This covers cost of clothing, comforts allowance, non-EPF health and a portion of room and board for adults in need in homes for special care. Costs related to other types of homes for special care remain shareable to the full extent on behalf of eligible clientele including children. There was considerable consultation within and outside the Department to clarify the provisions of the FPFA-EPF (1977) as they affect the institutional care aspects of C.A.P.

There was an increase of 85 homes listed under the Plan and federal contributions under C.A.P. for institutional care totaled $259,295,000 in 1977-78.

2) Welfare Services Administration

i) Welfare Services - Services to assist physically, mentally and developmentally handicapped persons, including the elderly, to maintain themselves in the community have continued to develop. Services related to the rehabilitation of hard-to-employ persons have also become increasingly important. Welfare Services as defined in Section 2 of the Act, have continued to expand, particularly the Homemakers' Services component of provincial Home Care Programs and Crisis Centres providing services on a 24-hour basis for situations requiring immediate support.

ii) Day Care - During the year over 200 day care centres were listed under the Canada Assistance Plan Agreement for cost-sharing. The Day Care Guidelines continued to serve as the mechanism for determining the extent of federal contributions to this service.

iii) Young Offenders' Agreements - Special agreements with Ontario, New Brunswick and the Yukon Territory under the authority of the Appropriations Act were renewed enabling continued cost-sharing of certain care and after-care services provided to young offenders in these provinces.

3) Work Activity

Under the Work Activity component of the Canada Assistance Plan, six new projects were approved during the year. The 35 projects that were cost-shared with the provinces in 1977-78 had a total capacity to serve approximately 1800 persons. Participants are persons in need or likely to become in need who have experienced unusual difficulty in obtaining or holding employment, or in improving their motivation and capacity to work through participation in programs designed to prepare them for entry or return to employment or for further vocational training.

4) Program Finance

This Division provided consultative and advisory services to the provinces on financial aspects of the cost-shared welfare programs. It developed estimates and forecasts relating to transfer payments to the provinces and negotiated settlement of claims with them. The Division also coordinated audit and review procedures and analysed financial data to permit the formulation and implementation of policies and related legislative proposals.

5) Field Offices

There are field offices in nine provincial capitals. The federal field representative's primary role is to establish the eligibility and shareability of various provincial welfare programs and to insure their compatibility under the various programs administered by the Directorate. (S)He also examines provincial claims and acts as an information resource on the shareability of new program initiatives in the provinces. This latter role, due to his/her expertise in Provincial Legislation, has become increasingly important because of the numerous changes in provincial programs. During the year, the field offices were actively involved in defining the interface between C.A.P. and the FPFA-EPF Act.

III. TABLES AND CHARTS

TABLE 1

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN BY PROGRAM DURING FISCAL YEAR 1977-78

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	24,991	8,670	1,593	1,813	2,748	221	40,036
Prince Edward Island	4,690	678	238	145	1,622	8	7,381
Nova Scotia	31,600	6,787	1,746	238	7,171	96	47,638
New Brunswick	39,858	4,073	1,135	1,311	4,740	(30)	51,087
Quebec*	351,783	140,687	21,627	14,090	61,000	299	589,486
Ontario	278,549	30,796	29,630	2,469	53,568	657	395,669
Manitoba	28,050	5,554	7,463	2,023	9,952	1,409	54,451
Saskatchewan	32,462	9,458	2,539	1,221	10,123	7	55,810
Alberta	75,754	15,711	8,356	1	15,323	318	115,463
British Columbia	123,349	35,206	1,113	6,671	32,371	179	198,889
Northwest Territories	1,825	1,631	171	23	1 296	-	4,946
Yukon	389	44	146	-	346	-	925
TOTAL	993,300	259,295	75,757	30,005	200,260	3,164	1,561,781

*Payments made to Quebec under the Federal Provincial Fiscal Arrangements and Established Programs Financing Act, 1977.

TABLE 2

FEDERAL PAYMENTS TO THE PROVINCES UNDER THE CANADA ASSISTANCE PLAN
BY PROGRAM DURING FISCAL YEAR 1976-77

PROVINCE	General Assistance	Homes for Special Care	Child Welfare	Health Care	Welfare Services	Work Activity Part III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Newfoundland	24,850	8,868	1,579	2,244	2,540	266	40,347
Prince Edward Island	4,195	5,003	220	79	1,169	2	10,668
Nova Scotia	27,351	11,632	2,216	408	5,213	-	46,820
New Brunswick	53,018	7,221	1,112	1,271	4,266	378	67,266
Quebec*	312,762	218,775	20,956	13,285	47,000	2,052	614,830
Ontario	247,453	83,211	20,391	2,269	54,849	492	408,665
Manitoba	26,447	8,145	6,817	1,882	8,523	1,317	53,131
Saskatchewan	35,128	17,846	2,101	1,278	7,019	140	63,512
Alberta	65,182	19,906	8,423	79	13,570	-	107,160
British Columbia	105,986	38,935	3,526	9,584	26,430	240	184,701
Northwest Territories	1,552	1,487	152	26	1,042	-	4,259
Yukon	241	235	124	-	192	-	792
TOTAL	904,165	421,264	67,617	32,405	171,813	4,887	1,602,151

*Payments made to Quebec under the Established Program (Interim Arrangements) Act through the Department of Finance.

TABLE 3

NUMBER OF PERSONS ASSISTED UNDER THE CANADA ASSISTANCE PLAN AS OF MARCH 31, 1978

All figures are estimates

PROVINCE	Children in Care	Assistance Recipients	Adults in Homes for Special Care	TOTAL
Newfoundland	3 305	53 813	2 658	59 776
Prince Edward Island	282	8 329	1 167	9 778
Nova Scotia	2 178	49 762	3 793	55 733
New Brunswick	2 200	63 432	4 215	69 847
Quebec	30 938	464 503	23 647	519 088
Ontario	13 615	356 324	44 139	414 078
Manitoba	2 811	52 489	1 173	56 473
Saskatchewan	2 638	41 363	7 986	51 987
Alberta	10 474	85 060	3 323	98 857
British Columbia	10 415	140 962	8 181	159 558
Northwest Territories and Yukon	1 100	5 639	n/a	6 739
TOTAL	79 956	1 321 676	100 282	1 501 914

Source: Canada Assistance Plan Directorate, Department of National Health and Welfare.

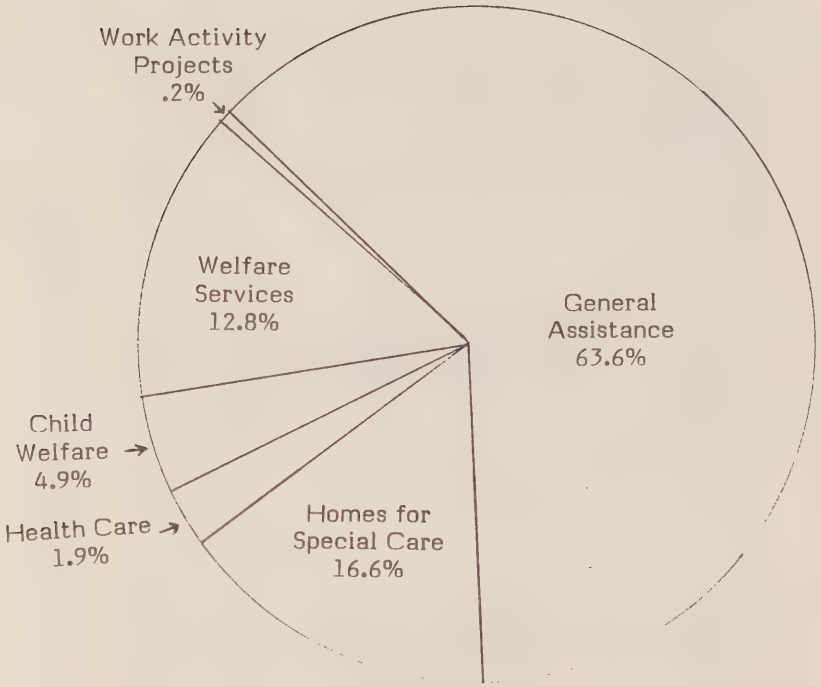


CHART 1 - ALLOCATION OF EXPENDITURES SHARED UNDER THE CANADA ASSISTANCE PLAN FISCAL YEAR 1977-1978

Federal Payments to Provinces

The reduction in total payments to the provinces and territories is due to the introduction in April 1977 of the Federal Provincial Fiscal Arrangements and Established Programs Financing Act. This latter legislation assumed a large percentage of costs relating to Adult Institutional Care which was formerly shareable under C.A.P.

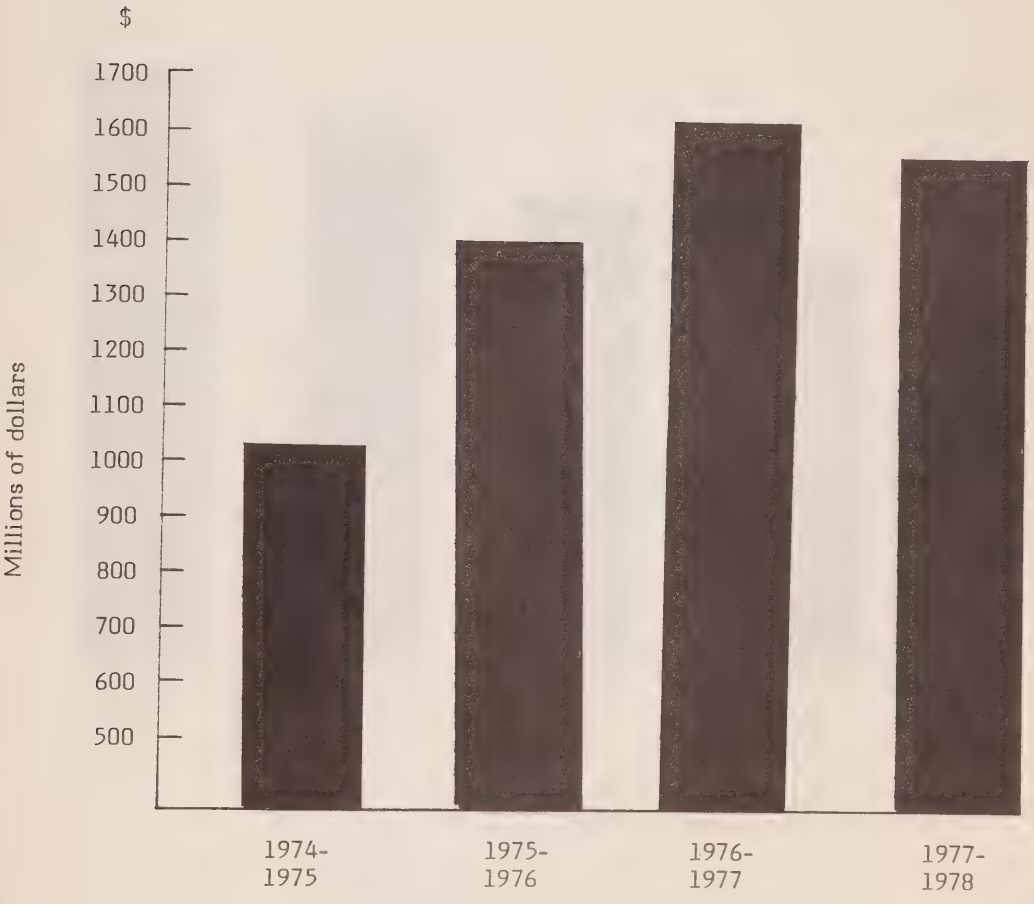


CHART 2 - TOTAL FEDERAL PAYMENTS UNDER THE CANADA ASSISTANCE PLAN

including payments to Quebec under the Established Programs (Interim Arrangements) Act. As of April 1, 1977 payments to Quebec were made under the Federal Provincial Fiscal Arrangements and Established Programs Financing Act.

General Assistance

The growth in general assistance costs in 1977-1978 was due to higher provincial assistance rates and the rising cost of living.

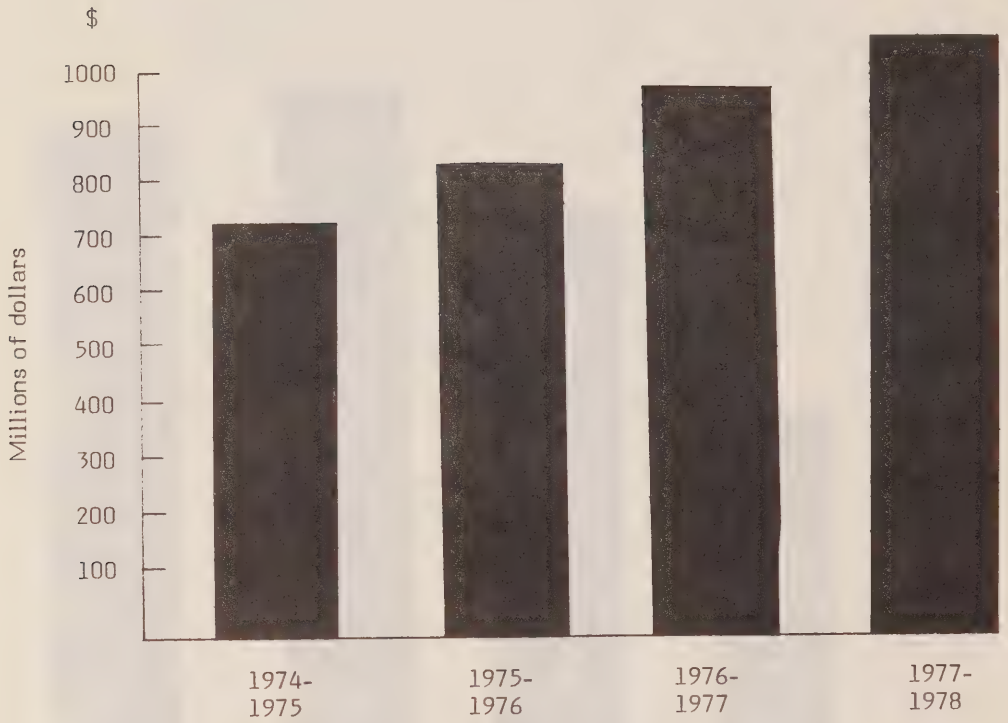


CHART 3 - GENERAL ASSISTANCE
- FEDERAL SHARE OF COSTS

Homes for Special Care

The decrease in federal contributions in 1977-78 towards the cost of care in a home for special care resulted from the introduction, effective April 1, 1977, of the Federal-Provincial Fiscal Arrangements and Established Programs Financing Act. Cost-sharing under the Canada Assistance Plan was reduced to certain assistance costs on behalf of needs-tested persons.

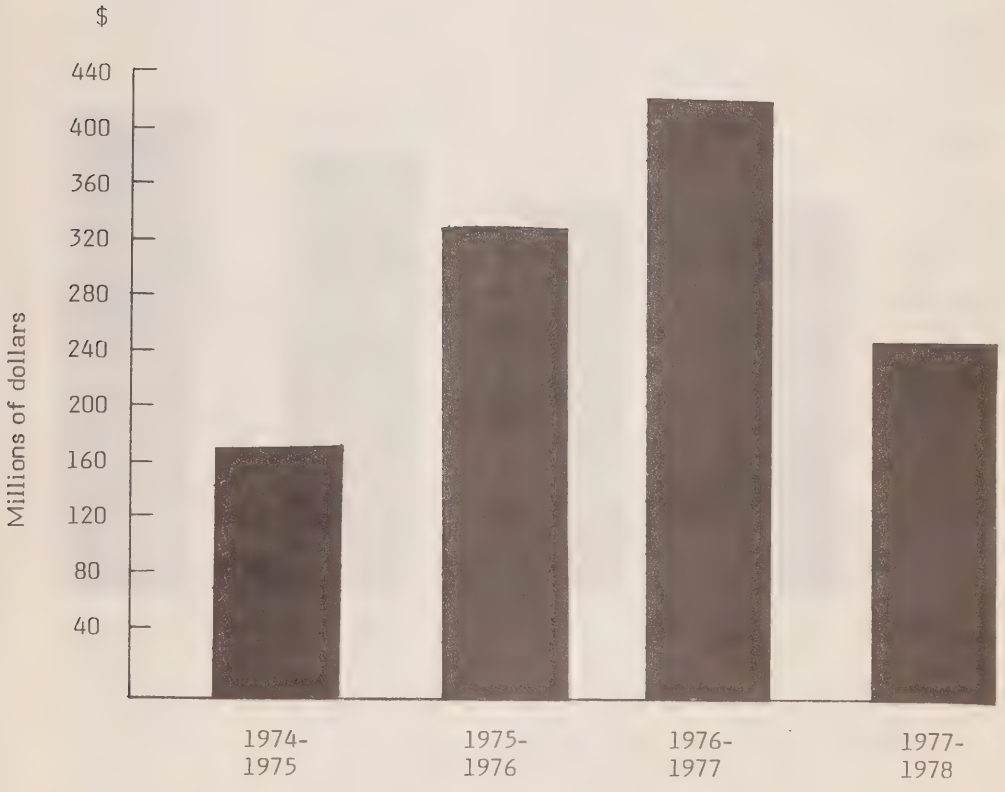


CHART 4 - HOMES FOR SPECIAL CARE
- FEDERAL SHARE OF COSTS

Child Welfare

The increase in costs for the 1977-78 periods is attributed to higher costs of maintenance, salaries and services.

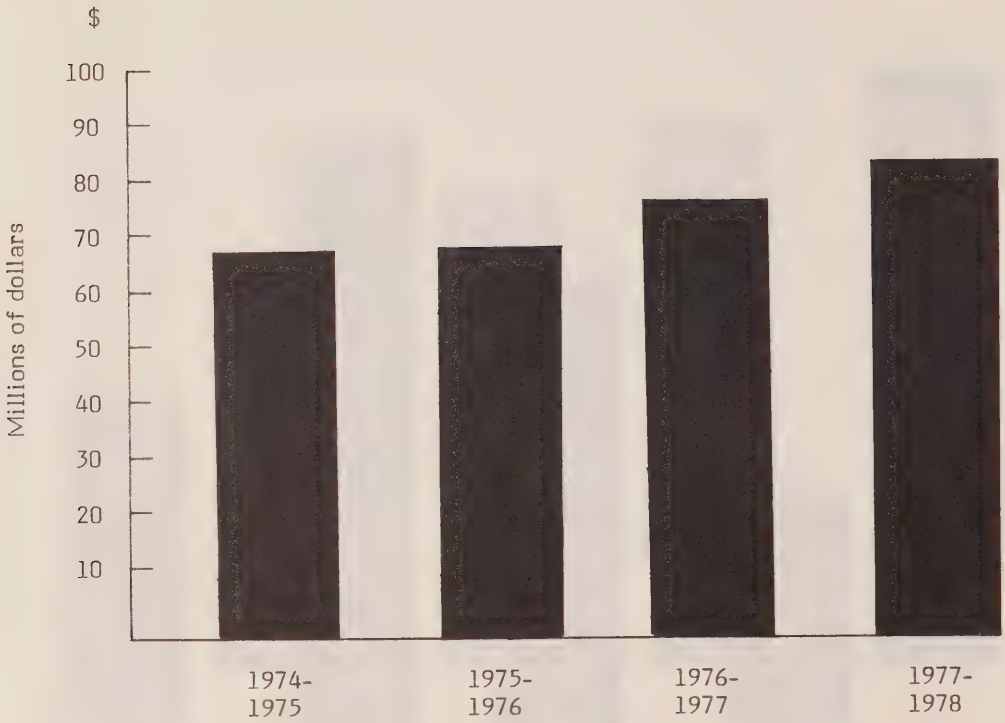


CHART 5 - CHILD WELFARE
- FEDERAL SHARE OF COSTS

Health Care

The decrease in the amount of federal payments to provinces towards the costs of health care services in 1977-78 resulted from the introduction of the Federal-Provincial Fiscal Arrangements and Established Programs Financing Act, 1977. Some of the health care costs for persons in need were covered by the block fund.

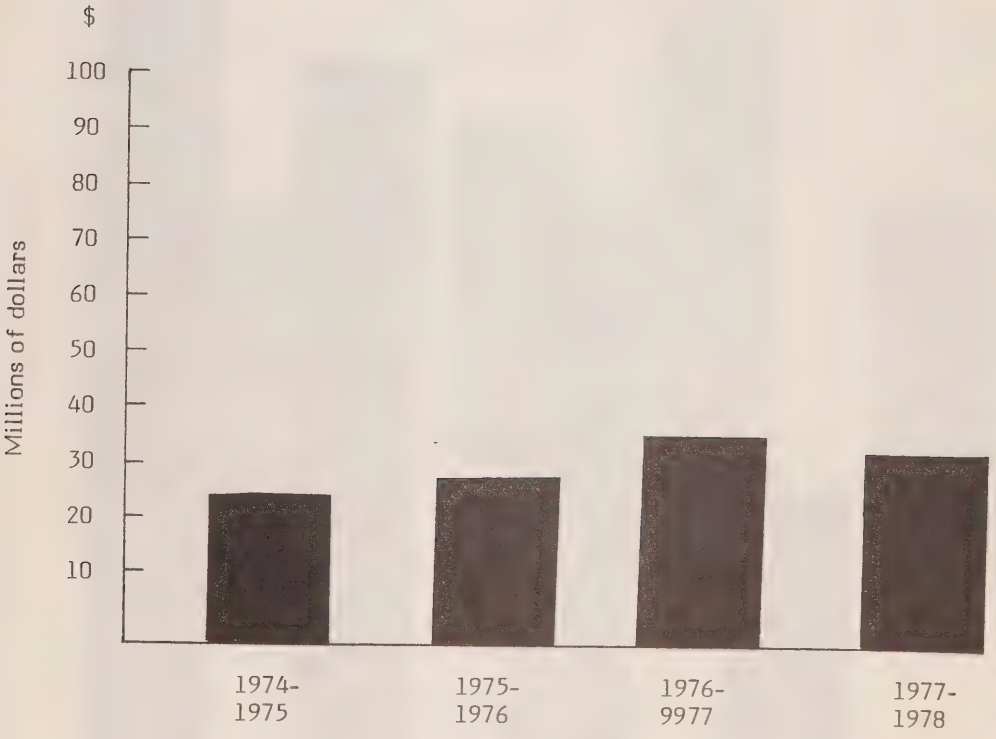


CHART 6 - HEALTH CARE FOR PERSONS IN NEED
- FEDERAL SHARE OF COSTS

Welfare Services

The increase in federal contributions continued at a steady rate in 1977-78. This was the result of a general increase in the cost to the provinces and municipalities of providing welfare services together with a continued interest in expanding existing services.

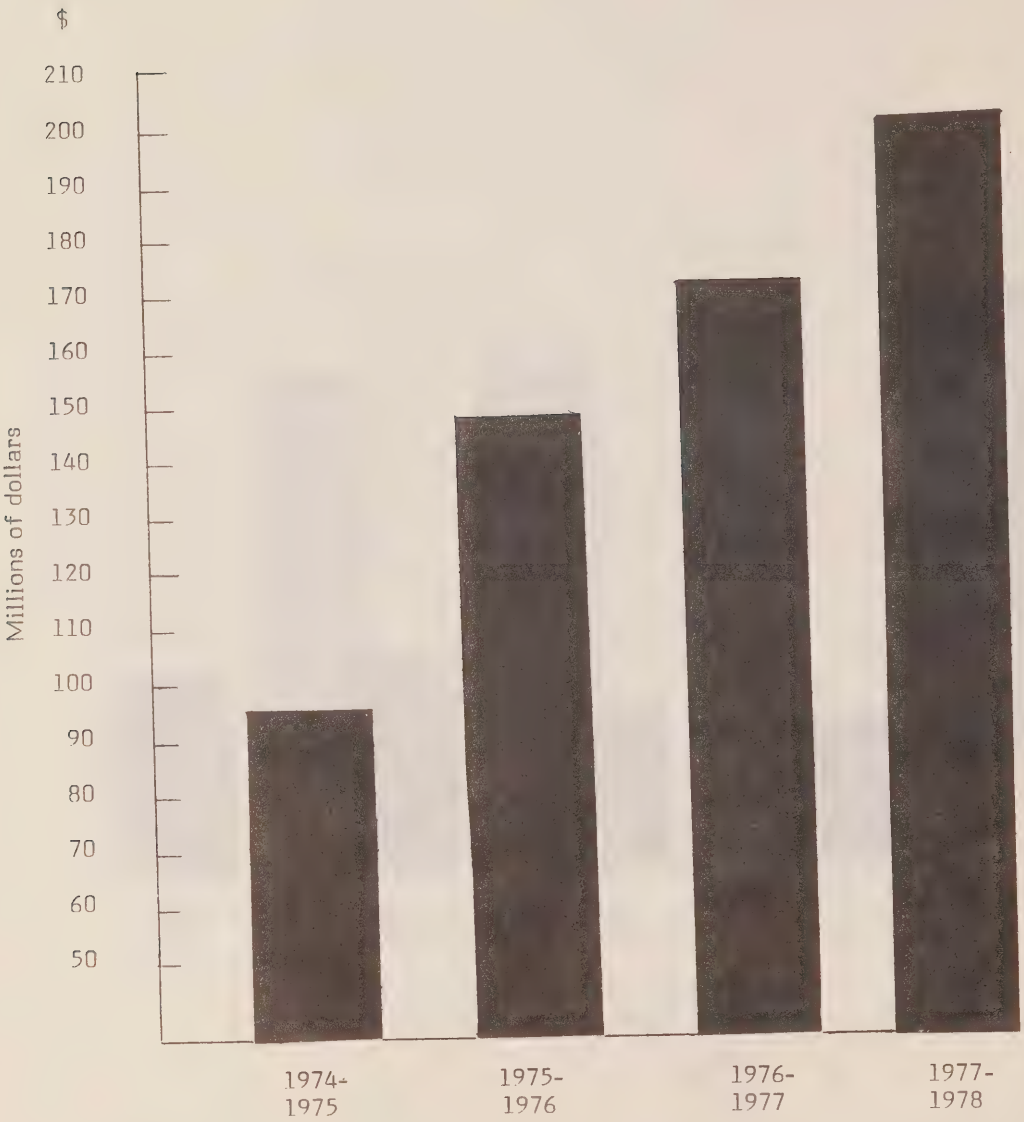


CHART 7 - WELFARE SERVICES
- FEDERAL SHARE OF COSTS

Work Activity

The decrease in this area from 1976-77 was due to a reduction in the number of projects approved and to a number of approvals which are pending and which may be claimed and paid in subsequent years.

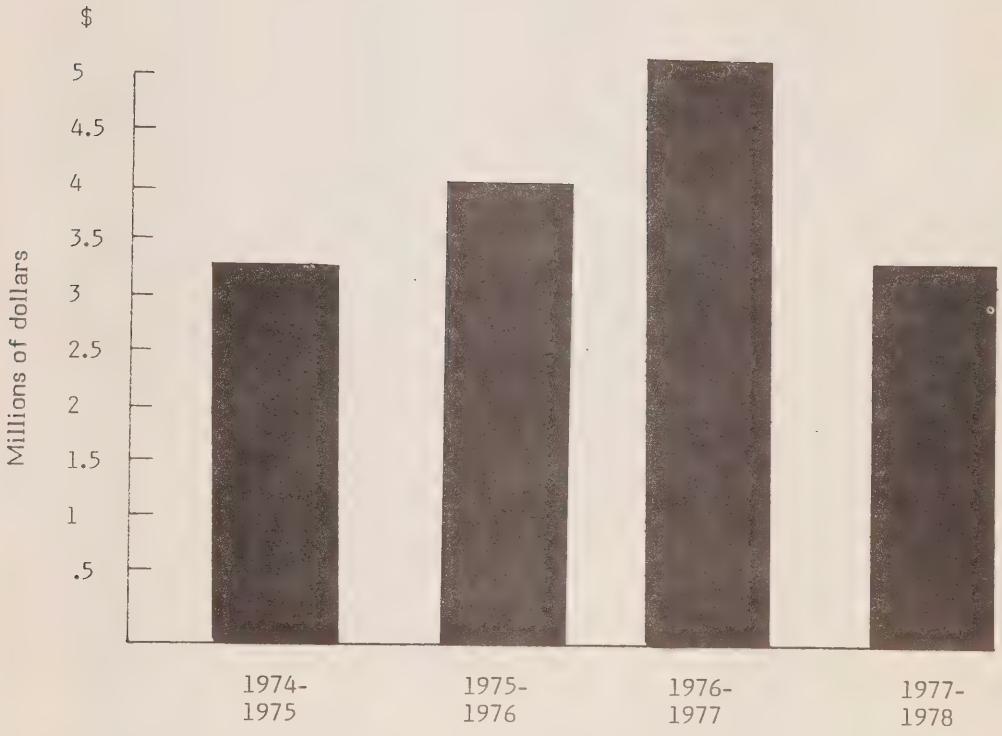


CHART 8 - WORK ACTIVITY PROJECTS
- FEDERAL SHARE OF COSTS

L'adaptation au travail

La diminution dans ce secteur par rapport à 1976-1977 est le résultat d'une réduction du nombre de projets approuvés et d'un certain nombre d'approbations à venir qui peuvent être demandées et payées au cours d'années ultérieures.

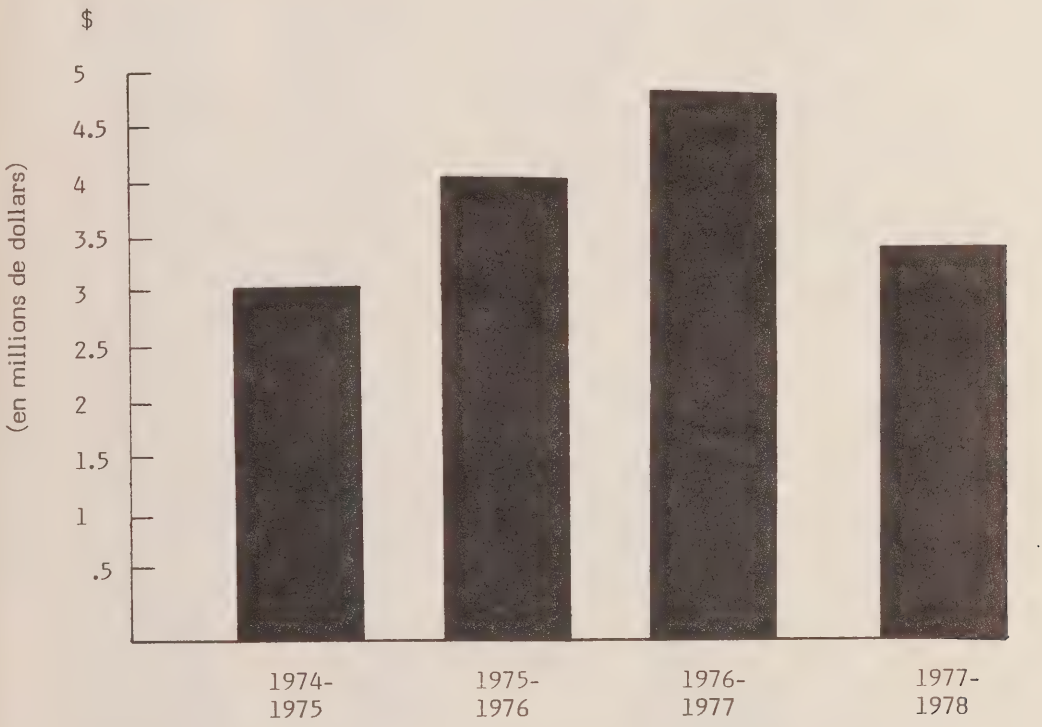


DIAGRAMME 8 - COÛTS DES PROJETS D'ADAPTATION AU TRAVAIL - CONTRIBUTION FÉDÉRALE

Services de bien-être social

L'accroissement des contributions fédérales s'est poursuivi de manière stable en 1977-1978. Cette augmentation est le résultat d'une hausse générale des coûts des provinces et des municipalités dans la distribution des services de bien-être, en plus d'une tendance accrue de leur part à élargir la gamme des services offerts.

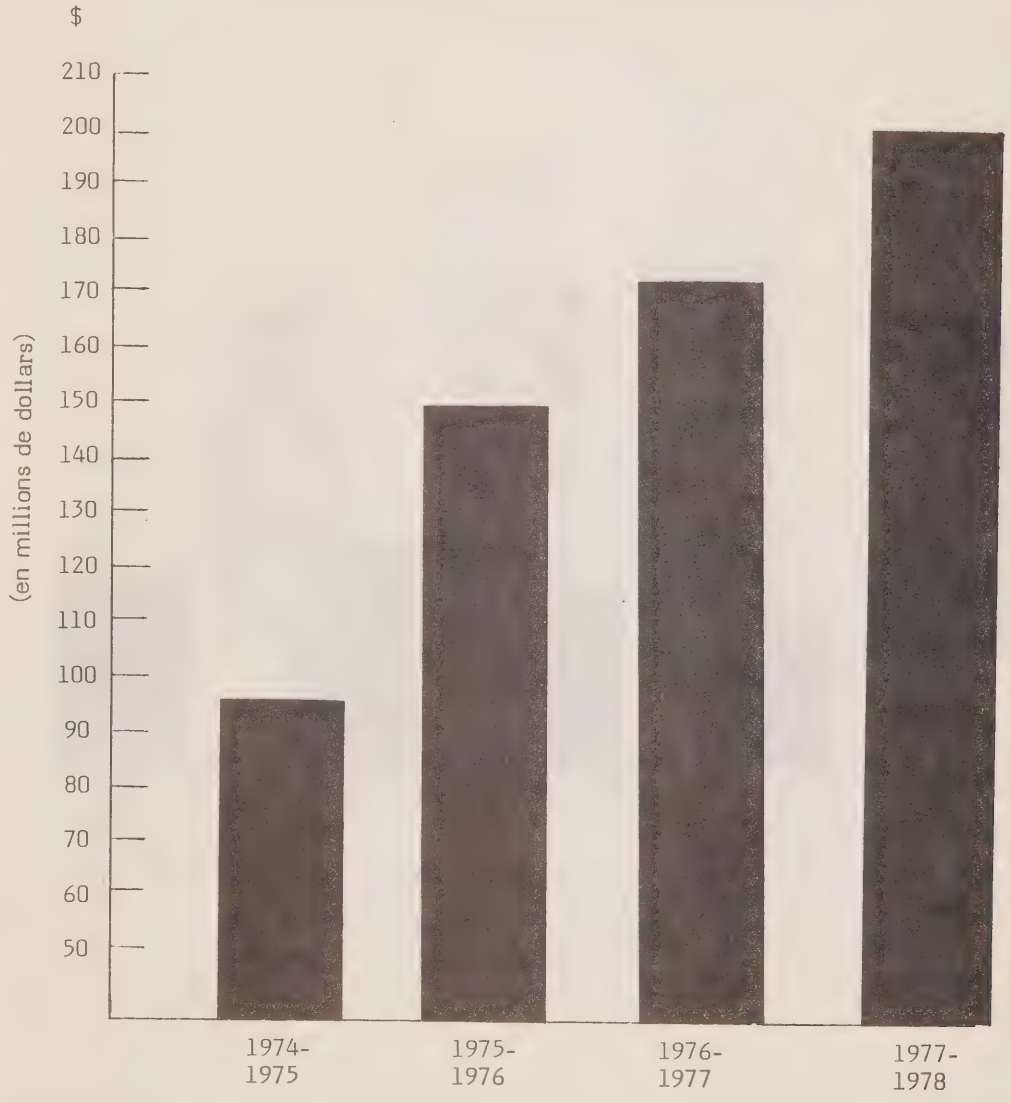


DIAGRAMME 7 - COÛTS DES SERVICES DE BIEN-ÊTRE SOCIAL
- CONTRIBUTION FÉDÉRALE

Soins médicaux

La diminution des versements fédéraux aux provinces pour contribuer au coût des services de soins de santé en 1977-1978 est due à l'entrée en vigueur de la Loi de 1977 sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis. Certains frais au titre des soins de santé pour des personnes nécessiteuses ont été couverts par le financement global.

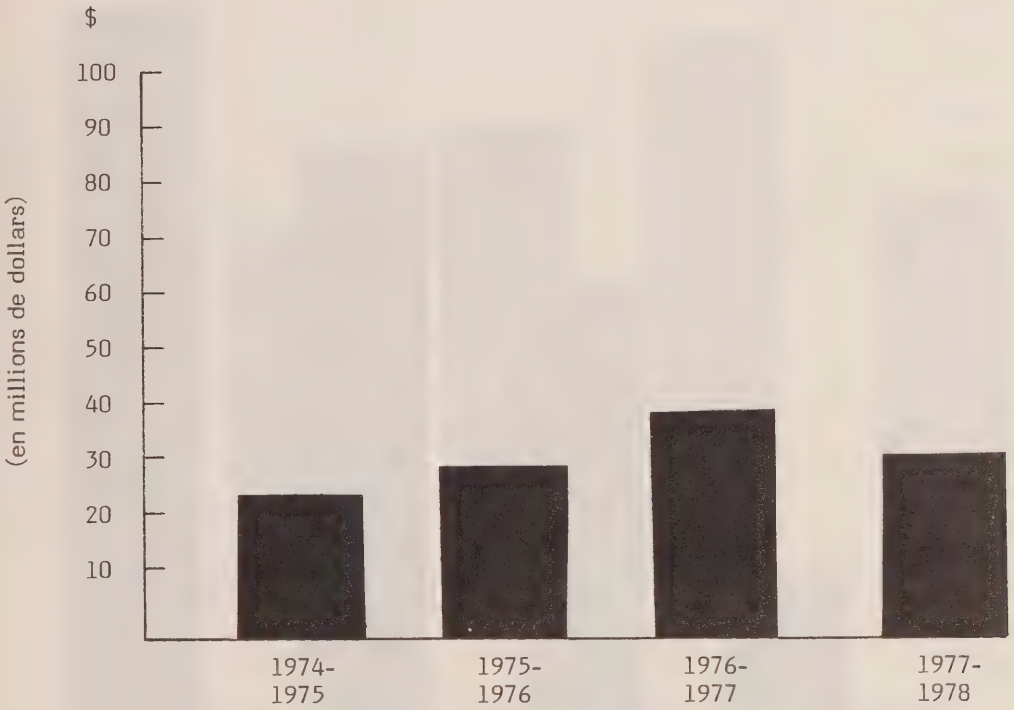


DIAGRAMME 6 - COÛTS DES SOINS MÉDICAUX POUR PERSONNES NÉCESSITEUSES
- CONTRIBUTION FÉDÉRALE

Bien-être de l'enfance

L'augmentation des coûts au cours de 1977-1978 est attribuable à des coûts plus élevés au titre de l'entretien, des traitements et des services.

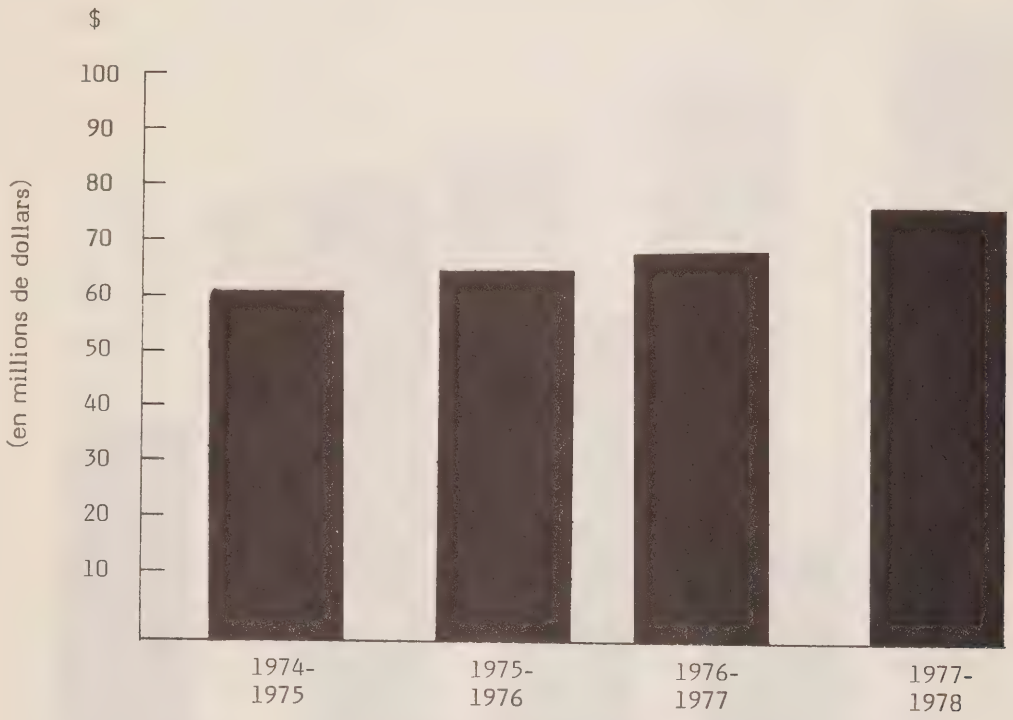


DIAGRAMME 5 - COÛTS DES SERVICES DE BIEN-ÊTRE DE L'ENFANCE - CONTRIBUTION FÉDÉRALE

Foyers de soins spéciaux

La réduction de la contribution fédérale, en 1977-1978, au coût des soins dans les foyers de soins spéciaux est le résultat de l'entrée en vigueur, à compter du 1er avril 1977, de la Loi sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis. Le partage des frais aux termes du Régime d'assistance publique du Canada a été réduit à certains coûts d'assistance pour les personnes nécessiteuses après examen de leurs besoins.

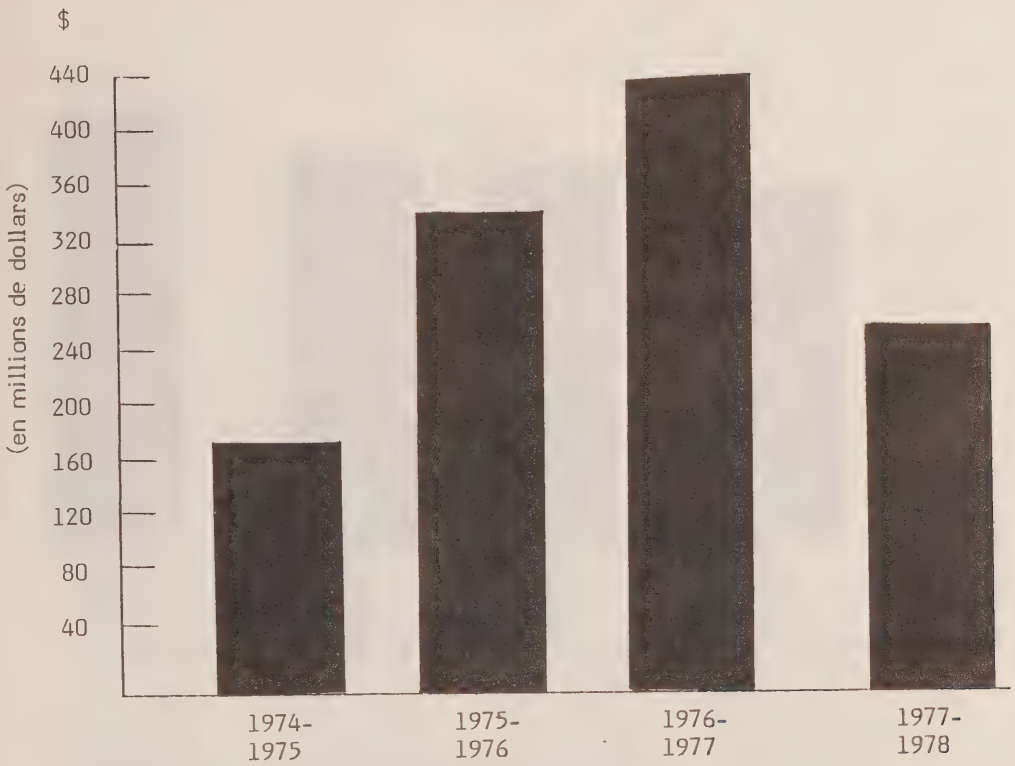


DIAGRAMME 4 - COÛTS DES FOYERS DE SOINS SPÉCIAUX
- CONTRIBUTION FÉDÉRALE

Assistance générale

L'accroissement des frais d'assistance générale, en 1977-1978, a été imputable à la hausse des taux d'assistance provinciale et à l'augmentation du coût de la vie.

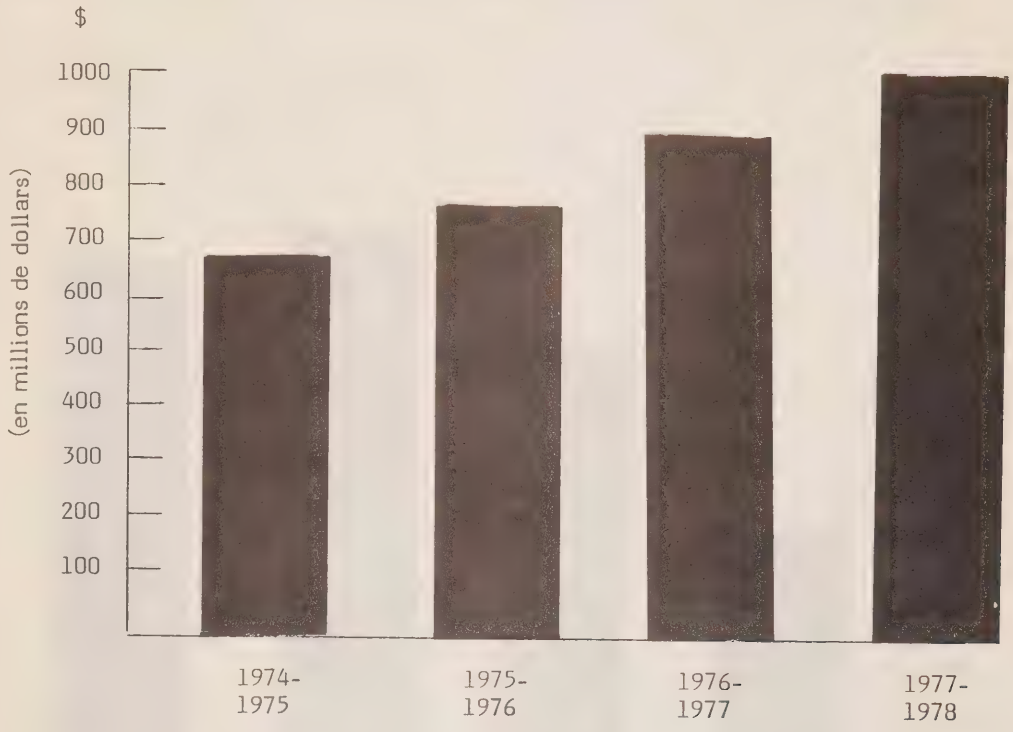


DIAGRAMME 3 - COÛTS DE L'ASSISTANCE GÉNÉRALE
- CONTRIBUTION FÉDÉRALE

Versements du gouvernement fédéral aux provinces

La réduction des versements totaux aux provinces et aux territoires est due à l'entrée en vigueur, en avril 1977, de la Loi sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis. Cette mesure législative a permis d'assumer une bonne part des coûts liés aux soins en établissement pour adultes, auparavant partagés aux termes du R.A.P.C.

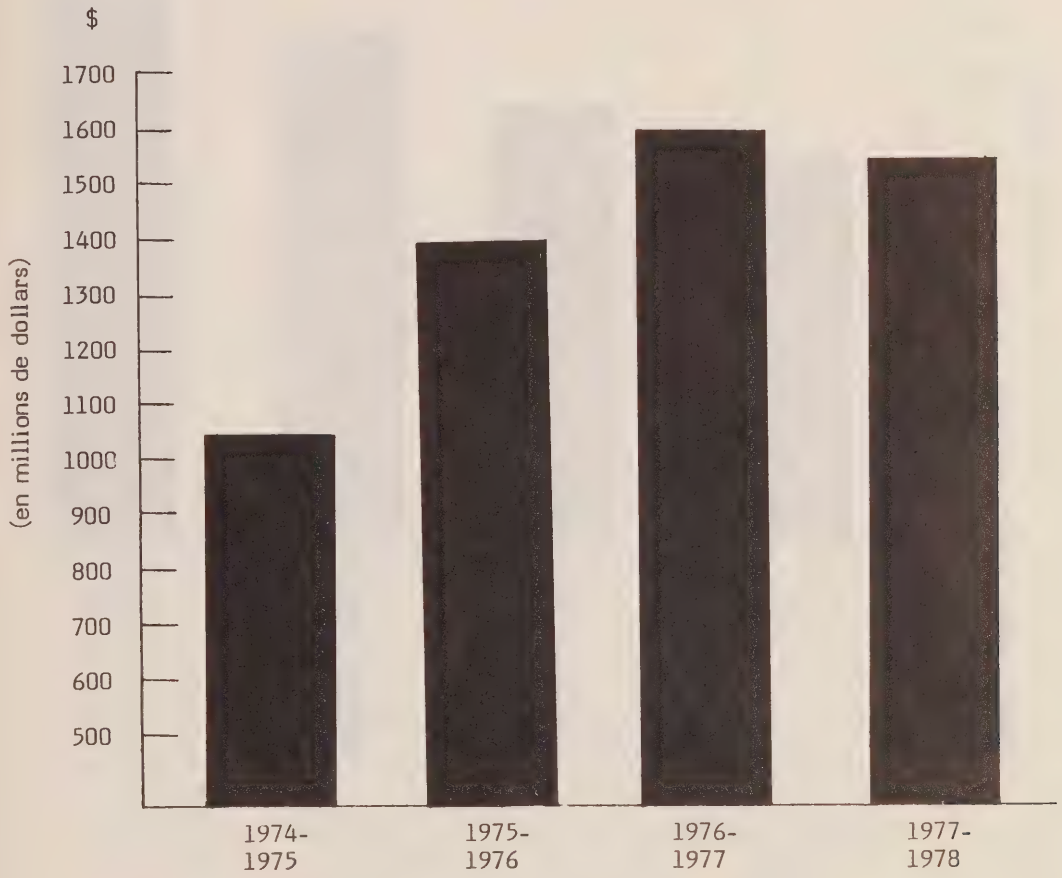


DIAGRAMME 2 - ENSEMBLE DES PAIEMENTS FÉDÉRAUX EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA

y compris les sommes versées au Québec en vertu de la Loi sur les programmes établis (Arrangements provisoires). Depuis le 1er avril 1977, les sommes versées au Québec le sont en vertu de la Loi sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis.

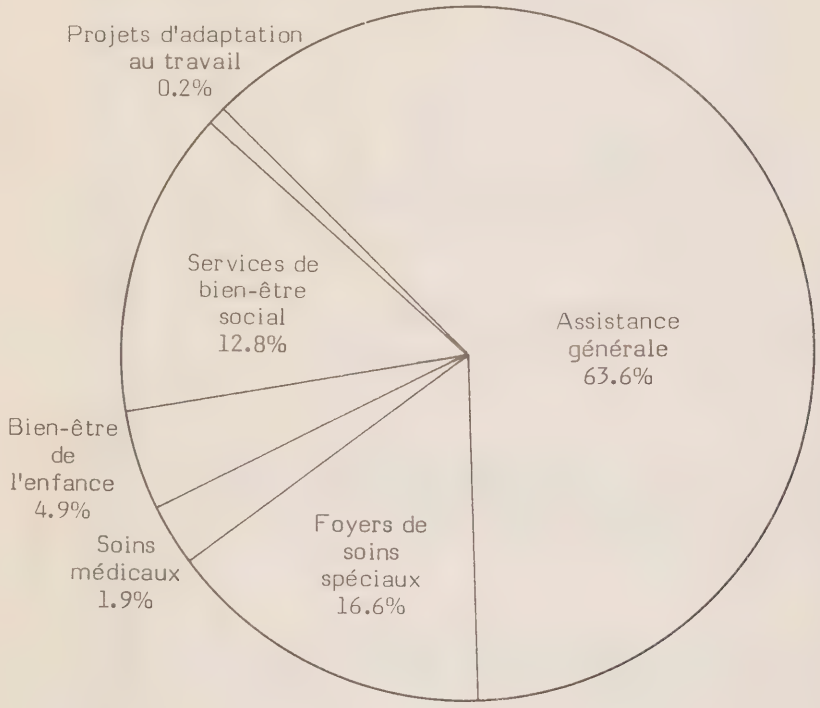


DIAGRAMME 1 RÉPARTITION DES DÉPENSES PARTAGÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, ANNÉE FINANCIÈRE 1977-1978

TABLEAU 3

NOMBRE DE PERSONNES ASSISTÉES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA, AU 31 MARS 1978

Tous les chiffres sont estimatifs

PROVINCE	Enfants placés	Assistés sociaux	Adultes dans les foyers de soins spéciaux	TOTAL
Terre-Neuve	3 305	53 813	2 658	59 776
Île-du-Prince-Édouard	282	8 329	1 167	9 778
Nouvelle-Écosse	2 178	49 762	3 793	55 733
Nouveau-Brunswick	2 200	63 432	4 215	69 847
Québec	30 938	464 503	23 647	519 088
Ontario	13 615	356 324	44 139	414 078
Manitoba	2 811	52 489	1 173	56 473
Saskatchewan	2 638	41 363	7 986	51 987
Alberta	10 474	85 060	3 323	98 857
Colombie-Britannique	10 415	140 962	8 181	159 558
Territoires du Nord-Ouest et Yukon	1 100	5 639	n/a	6 739
TOTAL	79 956	1 321 676	100 282	1 501 914

Source: Direction du Régime d'assistance publique du Canada, ministère de la Santé nationale et du Bien-être social.

TABLEAU 2

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA PAR PROGRAMME, ANNÉE FINANCIÈRE 1976-1977

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être de l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail Partie III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	24,850	8,868	1,579	2,244	2,540	266	40,347
Île-du-Prince-Édouard	4,195	5,003	220	79	1,169	2	10,668
Nouvelle-Écosse	27,351	11,632	2,216	408	5,213	-	46,820
Nouveau-Brunswick	53,018	7,221	1,112	1,271	4,266	378	67,266
Québec*	312,762	218,775	20,956	13,285	47,000	2,052	614,830
Ontario	247,453	83,211	20,391	2,269	54,849	492	408,665
Manitoba	26,447	8,145	6,817	1,882	8,523	1,317	53,131
Saskatchewan	35,128	17,846	2,101	1,278	7,019	140	63,512
Alberta	65,182	19,906	8,423	79	13,570	-	107,160
Colombie-Britannique	105,986	38,935	3,526	9,584	26,430	240	184,701
Territoires du Nord-Ouest	1,552	1,487	152	26	1,042	-	4,259
Yukon	241	235	124	-	192	-	792
TOTAL	904,165	421,264	67,617	32,405	171,813	4,887	1,602,151

*Montants versés au Québec par le ministère des Finances en vertu de la Loi sur les programmes établis (Arrangements provisoires).

TABLEAU 1

PAIEMENTS FÉDÉRAUX AUX PROVINCES EN VERTU DU RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA PAR PROGRAMME, ANNÉE FINANCIÈRE 1977-1978

PROVINCE	Assistance générale	Foyers de soins spéciaux	Bien-être de l'enfance	Soins médicaux	Services de bien-être	Projets d'adaptation au travail Partie III	TOTAL
	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)	($000's)
Terre-Neuve	24,991	8,670	1,593	1,813	2,748	221	40,036
Île-du-Prince-Édouard	4,690	678	238	145	1,622	8	7,381
Nouvelle-Écosse	31,600	6,787	1,746	238	7,171	96	47,638
Nouveau-Brunswick	39,858	4,073	1,135	1,311	4,740	(30)	51,087
Québec*	351,783	140,687	21,627	14,090	61,000	299	589,486
Ontario	278,549	30,796	29,630	2,469	53,568	657	395,669
Manitoba	28,050	5,554	7,463	2,023	9,952	1,409	54,451
Saskatchewan	32,462	9,458	2,539	1,221	10,123	7	55,810
Alberta	75,754	15,711	8,356	1	15,323	318	115,463
Colombie-Britannique	123,349	35,206	1,113	6,671	32,371	179	198,889
Territoires du Nord-Ouest	1,825	1,631	171	23	1,296	-	4,946
Yukon	389	44	146	-	346	-	925
TOTAL	993,300	259,295	75,757	30,005	200,260	3,164	1,561,781

*Montants versés au Québec en vertu de la Loi de 1977 sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis.

III. TABLEAUX ET DIAGRAMMES

4) Gestion financière des programmes

La Division a fourni des services de consultation aux provinces relativement aux aspects financiers des programmes de bien-être social à frais partagés. Elle a établi des prévisions en ce qui regarde les paiements de transfert aux provinces et a négocié le règlement de réclamations avec elles. La Division a de plus coordonné les procédures de vérification et d'examen et a analysé des données financières pour permettre l'élaboration et l'application de politiques et de propositions législatives connexes.

5) Bureaux régionaux

Des bureaux régionaux existent dans neuf capitales provinciales. Le rôle principal du représentant fédéral, à l'échelon régional, est d'établir l'admissibilité et la possibilité de partage des coûts de divers programmes provinciaux de bien-être social et d'assurer leur compatibilité avec les divers programmes administrés par la Direction. Il/elle étudie aussi les demandes provinciales et agit comme source de documentation sur le partage des coûts de nouvelles initiatives dans les provinces. Ce dernier rôle, étant donné la spécialisation du représentant en matière de lois provinciales, devient de plus en plus important en raison des nombreux changements dans les programmes provinciaux. Au cours de l'année, les bureaux régionaux ont participé activement à la définition de la corrélation entre le Régime d'assistance publique du Canada et la Loi sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis.

spéciaux. Les frais liés à d'autres genres de foyers de soins spéciaux peuvent toujours être partagés en entier au profit des bénéficiaires admissibles, dont les enfants. Les consultations ont été nombreuses tant à l'intérieur qu'à l'extérieur du Ministère pour clarifier les dispositions de la Loi de 1977 sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis en ce qui concerne la question des soins en établissement aux termes du R.A.P.C.

Quatre-vingt-cinq nouveaux foyers sont venus s'ajouter à la liste du Régime et les contributions fédérales au titre des soins en établissement se sont élevées à $259,295,000 en 1977-1978.

2) Administration des services de bien-être social

i) Services de bien-être social - Les services visant à aider les handicapés physiques et mentaux ainsi que les personnes qui ont des problèmes de développement, y compris les personnes âgées, à demeurer dans la collectivité ont continué de s'accroître. Les services axés sur la réadaptation des personnes "difficilement employables" ont également pris de l'importance. Les services de bien-être social, tels que définis par l'Article 2 du Régime, ont continué de s'étendre, notamment les services d'auxiliaires familiales des programmes provinciaux de soins à domicile et les centres d'intervention en cas de crise qui offrent des services vingt-quatre heures par jour dans des cas demandant un secours immédiat.

ii) Garde de jour - Au cours de l'année, plus de 200 centres de garde de jour ont été acceptés pour le partage des frais dans le cadre du R.A.P.C. Les directives sur les garderies ont continué à être le mécanisme permettant de déterminer le niveau des contributions fédérales à ce titre.

iii) Accords sur les jeunes délinquants - Les accords spéciaux intervenus avec l'Ontario, le Nouveau-Brunswick et le Yukon en vertu de la Loi portant affectation de crédits ont été reconduits, ce qui a permis de poursuivre le partage des frais de certains services de soins et de post-cure fournis aux jeunes délinquants dans ces provinces.

3) Adaptation au travail

En vertu du programme d'adaptation au travail du Régime d'assistance publique du Canada, six nouveaux projets ont été approuvés pendant l'année. Les 35 projets dont les coûts étaient partagés avec les provinces en 1977-1978 pouvaient accueillir quelque 1800 personnes au total. Les participants sont des personnes nécessiteuses, ou en voie de l'être, qui éprouvent des difficultés particulières à obtenir ou à conserver un emploi, et à qui sont offertes des possibilités d'améliorer leur motivation et leur capacité de travail par la participation à des programmes conçus pour les préparer à entrer sur le marché du travail ou à les réintégrer, ou à poursuivre une formation professionnelle.

II. ACTIVITÉS PRINCIPALES

1) Administration de l'assistance

i) Assistance sociale - La Division de l'administration de l'assistance a continué à appliquer les dispositions d'assistance du Régime d'assistance publique du Canada. Les changements dans la législation et les procédures administratives apportés par les provinces au cours de l'année ont engagé la Division dans un processus continu de consultation, d'enquête et de revue.

La Division a également appliqué les directives régissant certaines des dispositions d'assistance du Régime, à savoir les directives sur les "exemptions de revenu", les "exemptions pour l'actif liquide", les "allocations fixes pour les personnes âgées et les invalides" et le "supplément aux personnes à faible revenu", toutes établies en 1975-1976. Le montant maximal de la contribution fédérale au titre des "allocations fixes pour les personnes âgées et les invalides" a été rajusté conformément à la hausse de l'indice du coût de la vie.

En ce qui concerne les appels, la Division a entrepris la création d'un ouvrage, Données générales sur les procédures d'appel du bien-être social dans les provinces du Canada, en vue du second atelier sur les appels dans le secteur du bien-être social, en novembre 1978.

L'année a été marquée par un développement majeur, l'adoption de la Loi de 1977 sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis, qui est entrée en vigueur le 1er avril 1977. En vertu de cette Loi, le gouvernement fédéral verse une somme aux provinces, au prorata de leur population, pour couvrir le coût de certains types de soins en établissement pour adultes, de services de soins à domicile et de services de soins ambulatoires fournis dans les provinces. L'inclusion de services de soins à domicile et de services de soins ambulatoires dans la somme proportionnelle versée aux provinces a eu une influence directe sur le partage des coûts des soins de santé comme poste d'assistance dans le cadre du Régime.

ii) Foyers de soins spéciaux - La contribution proportionnelle du gouvernement fédéral aux provinces, en vertu de la Loi sur les accords fiscaux entre le gouvernement fédéral et les provinces et sur le financement des programmes établis, pour couvrir les soins intermédiaires en maison de repos et les services de soins en établissement, pour adultes, a eu des conséquences importantes sur le programme de foyers de soins spéciaux du R.A.P.C. Alors qu'auparavant le R.A.P.C. assumait une partie du coût total de la garde d'adultes nécessiteux dans ce genre d'établissement, la participation du R.A.P.C. se limite actuellement au maximum de la pension de la Sécurité de la vieillesse et du Supplément de revenu garanti pour une personne seule. Cela comprend le coût de l'habillement, une allocation de menues dépenses, les soins de santé hors du champ des accords sur le financement des programmes établis et une partie de la chambre et pension pour les adultes nécessiteux dans des foyers de soins

I. INTRODUCTION

Le Régime d'assistance publique du Canada est le véhicule par lequel le gouvernement fédéral partage 50 pour cent des frais engagés par les provinces et les municipalités afin d'accorder l'assistance sociale aux personnes nécessiteuses. Le Régime prévoit aussi une quote-part fédérale de 50 pour cent de certains frais de services de bien-être social qui sont offerts aux personnes dans le besoin ou qui sont susceptibles de le devenir si elles ne reçoivent pas ces services. En vertu dudit Régime, le gouvernement fédéral partage les coûts des soins dispensés aux personnes nécessiteuses qui résident dans les établissements de bien-être social reconnus, tels que les foyers d'hébergement de vieillards, les maisons de repos, les institutions de soins pour enfants, ainsi que les établissements pour enfants et adultes physiquement ou mentalement handicapés. Le Régime s'étend également aux frais d'entretien des enfants confiés aux autorités provinciales de bien-être de l'enfance. En vertu du Régime d'assistance publique du Canada, le gouvernement fédéral paie aussi la moitié du coût des projets d'adaptation au travail conçus pour améliorer la capacité de travail des personnes qui éprouvent des difficultés exceptionnelles à obtenir ou à conserver un emploi, ou à entreprendre une formation professionnelle.

Le Régime a pour objectifs principaux:

- d'assister les provinces dans le développement de programmes d'ensemble ayant pour but d'aider toute personne dans le besoin pour n'importe quelle raison;

- d'encourager les mesures visant à maintenir des taux d'assistance permettant aux bénéficiaires de garder un niveau de vie raisonnable;

- d'appuyer la mise en place et le développement des services de bien-être social qui peuvent contribuer à prévenir et à éliminer les causes et les effets de la pauvreté, de la négligence à l'égard des enfants et de la dépendance de l'assistance publique;

- de favoriser la prestation de soins convenables aux personnes nécessiteuses qui résident dans les foyers de soins spéciaux.

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L'honorable Monique Bégin
Ministre de la Santé nationale et du Bien-être social

Madame,

Conformément aux dispositions de l'Article 20 du Régime d'assistance publique du Canada, j'ai l'honneur de présenter le Rapport annuel sur l'application du Régime pour l'année financière terminée le 31 mars 1978.

Je vous prie d'agréer, Madame, l'assurance de mes sentiments dévoués.

Le sous-ministre de la
Santé nationale et du
Bien-être social,

Pamela A. McDougall

Son Excellence
Le très honorable E.R. Schreyer
Gouverneur général et Commandant en chef du Canada.

QU'IL PLAISE A VOTRE EXCELLENCE,

J'ai l'honneur de présenter à Votre Excellence le Rapport annuel sur l'application du Régime d'assistance publique du Canada pour l'année financière terminée le 31 mars 1978.

Je vous prie d'agréer, Monsieur le Gouverneur général, l'assurance de mon profond respect.

Le ministre de la
Santé nationale et du
Bien-être social,

Monique Bégin

Régime d'assistance publique du Canada

Rapport annuel

1977-1978



RÉGIME D'ASSISTANCE PUBLIQUE DU CANADA 77-78 RAPPORT ANNUEL

Santé et Bien-être social Canada
Health and Welfare Canada

Canada

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